

Evaluation of BadgerCare Employer Verification Process

Department of Health and Family Services
Office of Strategic Finance
Program Evaluation and Audit Section
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Executive Summary

The BadgerCare program was created to provide health insurance for low-income families and children who are not eligible for Medicaid and who do not have access to employer sponsored health insurance. BadgerCare grew steadily after it started in April 1999. By January 2004, over 114,000 persons were enrolled.

In mid-May 2004, the Department implemented procedures to verify the self-reported income and insurance information used to determine eligibility for BadgerCare. The new procedures were implemented in response to state legislation requiring that BadgerCare applicants/recipients who are employed must verify their income and access to insurance with their employer. The new procedures applied to eligibility determinations for new applicants and the regularly scheduled re-determinations of eligibility for current recipients. Under the new procedures, BadgerCare applicants/recipients were required to have their employers complete state forms verifying income and insurance and for retrieving and sending the completed forms to EDS, Wisconsin's fiscal agent for Medicaid.

A short-term modest decline in the number of persons receiving health insurance through BadgerCare was expected when the new employer verification requirements were implemented. But, after the new employer verification requirements took effect, the number of BadgerCare recipients decreased more than expected. Reasons for eligibility denials during this period of time showed that the new employer verification requirements were a key reason for denying eligibility for BadgerCare applicants/recipients.

The Secretary of the Department requested the Office of Strategic Finance, Program Evaluation and Audit Section to analyze why the new employer verification forms were not being returned as required. In order to understand the new employer verification process from a number of different perspectives, we collected information from clients, employers and income maintenance workers:

- Selected counties were visited and in-person interviews were conducted with income maintenance workers and supervisors
- A web-based survey was administered to income maintenance workers and supervisors throughout the state
- Employers of BadgerCare applicants/recipients denied eligibility due to the new employer verification process in September 2004 were identified and a small number were interviewed by phone
- Statistical information on persons denied BadgerCare eligibility in the month of September 2004 due to the new employer verification process was analyzed and used to compare these persons to the overall BadgerCare caseload
- APS Healthcare Inc. worked with us to design and implement a phone survey to contact a sample of persons who had been denied BadgerCare coverage in September 2004 due to the new employer verification process.

The study was carried out in October through mid-December 2004 and analyzes the impact of the employer verification process on the BadgerCare caseload through November 2004. Descriptive information on the overall BadgerCare caseload is also presented through June of 2005.

Some have speculated that employer verification forms are not being returned as required because clients have excess income or access to insurance and thus are not eligible for BadgerCare. While this may be true in some cases we have learned that in many cases, completed employer verification forms (EVFs) are not being returned as required because of factors, such as employers not completing the forms in a timely manner, which the clients cannot control. We identified a number of aspects of the employer verification process that were barriers for clients and employers.

Summary of Evaluation Findings

The new EVF requirements appeared to be the key factor in the caseload decline that took place after the new requirements were implemented. Other factors that also may have contributed to the decline included: movement between BadgerCare and Family Medicaid, and the BadgerCare premium increase that took effect January 2004. Once the new EVF requirements were implemented they began to account for approximately 5% of the applications that were denied and for approximately 14% of the BadgerCare recipients terminated. This was almost equivalent to the total increase in application denials and terminations in this period of time. Improvements made to the EVF process after it was implemented may have contributed to the lessening of the caseload decline that began in the last months of 2004.

Among the persons who were denied or terminated from BadgerCare due to the new EVF requirements, failure to verify health insurance was far more likely to be the reason for ineligibility than failure to verify earnings. The number of persons denied eligibility because completed health insurance verification forms were not returned was more than five times greater than the number denied eligibility because completed verification of income forms were not returned.

As expected, most of the persons denied BadgerCare eligibility due to the new EVF requirements were applicants rather than BadgerCare recipients. Thus the decline in the BadgerCare caseload related to the new EVF procedures resulted more from new applicants not receiving coverage than from current recipients losing their BadgerCare coverage.¹

¹ It would be expected that most of the persons denied BadgerCare eligibility due to the new EVF requirements would be applicants rather than recipients because, in any given month, the number of BadgerCare applicants denied is far greater than the number of recipients terminated. Because denied BadgerCare applicants include persons applying for BadgerCare for the first time as well as on-going cases that have already been terminated or denied in a previous month for not completing EVFs or for other reasons, it is not known how many of the denied applicants were former BadgerCare recipients.

Characteristics of Persons Denied BadgerCare Eligibility Due to the EVF Process

Persons denied BadgerCare eligibility due to the EVF process were more likely to have unearned income or income from multiple workers and to work for an employer with a home office outside of Wisconsin.

Persons denied or terminated from BadgerCare due to the EVF requirements also were twice as likely to be Hispanic as persons in the overall BadgerCare caseload. Even though Hispanics are disproportionately affected by the EVF process, only a relatively small percentage of the persons denied or terminated from BadgerCare due to the EVF requirements reported language barriers on CARES, the automated Medicaid/BadgerCare eligibility system. While it is possible that language barriers are under reported, it may be that other explanations such as less cooperation on the part of employers contribute to this pattern.

Role of Excess Income and Access to Insurance

It has been speculated that clients are not returning the EVF forms because they have excess income or access to insurance and therefore are not eligible for BadgerCare. While this may take place in some cases, information from this evaluation as well as other research does not support this. The persons denied eligibility due to the EVF requirements had been determined otherwise eligible based on their self-declared income. Previous research by the Department's Medicaid Quality Assurance Unit and by the Legislative Audit Bureau has found that only a small percentage (5 to 6 %) of persons determined eligible based on self-declared income would not have been determined eligible if this income had been verified instead of self-declared.²

Other information obtained as part of this evaluation also suggests that excess income or access to insurance are not key reasons for why completed EVF forms are not being returned as required.

- Income maintenance caseworkers that were surveyed or interviewed did not cite excess income or access to insurance as key reasons for why EVF forms are not being returned.
- The pilot phone survey of 30 clients who were denied or terminated from BadgerCare solely because completed EVF forms were not returned as required found that all seven

² A report by the Department's Medicaid Eligibility Quality Control unit notes that of 353 cases reviewed that were certified eligible for Medicaid, 8% were found in error with 6% being the result of income errors. The other 2% were the result of non-financial factors such as residency. (Wisconsin Department of Health and Family Services "The State of Wisconsin's Medicaid Eligibility Quality Control 2002" page i and page 2.)

As part of its review of Medicaid eligibility determinations, The Wisconsin Legislative Audit Bureau compared the self-reported income of Medicaid applicants to income shown on annual tax returns and wage data for the 4th quarter of 2002 from the State Wage Information Collection Agency (SWICA). Based on reviewing 200 cases, the Legislative Audit Bureau found income discrepancies of more than \$100 in 57 cases. But income discrepancies affected eligibility in just 10 or 5% of these cases. In 6 of these 10 cases recipients benefited based on income discrepancies. The Audit Bureau noted that factors such as increased work hours not anticipated at the time of application could explain some of these discrepancies. (Wisconsin Legislative Audit Bureau, "An Evaluation: Medical Assistance Eligibility Determinations, Department of Health and Family Services" Report 04-11, September 2004, page 33.)

of the clients who subsequently re-applied, were subsequently determined eligible for BadgerCare.

Reasons Why EVF Forms Are Not Returned

A number of reasons for why completed EVF forms are not being returned as required were identified. These ranged from factors such as insufficient time allowed for distributing and completing the forms to technical issues related to data processing issues. Many of these were factors that clients cannot control.

1. More time is needed to complete the verification process because employers often need additional time and also because of factors such as postal delays. Employers' need for additional time is related to the procedures they use to verify income and health insurance. These procedures frequently include outsourcing verification of earnings and insurance, responsibility for verifying earnings and health insurance being assigned to different units within a company, and centralization of functions so that verification forms need to be sent to corporate headquarters in other cities or states. Postal delays can occur at various points in the process including: mailing the form to the client; the employer distributing the form to subunits within the company or to outsourced Human Resource (HR) agents; the employer returning the form to the applicant/client; and the applicant/client returning the form to EDS, the state fiscal agent for Medicaid that is responsible for scanning and processing the EVF forms.
2. The EVF forms and instructions were not clear, and the Spanish translation of the forms was especially confusing. This may have contributed to lack of understanding on the part of clients and employers of the implications for clients if the forms were not completed within the prescribed times.
3. Some aspects of the process made it more difficult to meet the requirements. Examples included not providing pre-addressed business reply envelopes to return the forms and the lack of provisions for employers to fax or mail the forms back directly to EDS.
4. Employers lacked awareness of the importance of the forms and of the consequences for employees of not completing the forms within the required time frames. We found diffused responsibility for wage and insurance verification functions among employers.
5. Income maintenance workers feel that the primary reasons why verification forms are not returned is because clients have difficulty getting their employers to complete the verification form by the due date. Income maintenance workers shared many recommendations to improve the EVF verification forms and the overall process.
6. One-third of the 30 persons denied or terminated from BadgerCare due to the EVF process who were contacted in a phone survey did not know that they had been denied /terminated. Of those that did know they had been denied/terminated, just slightly over half (57%) understood why they were denied coverage, pointing to a high level of confusion among participants and applicants in general.

7. Problems were reported related to the mechanized data entry procedures for EVF forms and to the subsequent processing of the information in CARES, the automated Medicaid/BadgerCare eligibility system.

Improvements to the EVF Process

The Department made a number of important improvements to the EVF process after it was first implemented in mid-May 2004, and these changes may have contributed to the lessening of the caseload decline that started in the last three months of 2004. These changes are described in the body of this report. Based on the information we obtained, the Department also developed an action plan to further improve the employer verification process. This plan includes:

- improvements to the EVF cover letters and forms
- process improvements such as allowing income maintenance workers to choose between verification of earnings using either the employment verification form or pay stubs, allowing employers to return the EVF forms to the scanning center, and extensions to the deadlines for returning the EVF forms
- exploring options for modifications that might be appropriate to improve access to BadgerCare for persons who are Spanish-speaking
- public information campaigns and other efforts to increase awareness of the EVF process and requirements.

The plan also includes efforts to assess if there are better ways to find out about access to employer-subsidized health insurance (employer database, survey, etc.) rather than asking employees to verify individually with employers.

Subsequently to the initiation of this study and the implementation of the Department's action plan described above, several provisions were included as part of the 2005-07 biennial budget bill. These are: a provision directing the Department to mail health insurance verification forms to the employer and requiring employers to complete and return the forms; a requirement permitting employers at their option to return completed health insurance verification forms by any electronic means approved by the Department; a provision creating a \$50 forfeiture and allowing the Department to levy a penalty assessment of \$50 for each application the employer fails to return to the Department postmarked within 30 working days after the health insurance verification form is mailed to the employer; and a provision limiting the maximum forfeiture and penalty assessments an employer of less than 250 people would be required to pay to \$1,000 in a 6-month period and limiting the maximum forfeiture and penalty assessments an employer of 250 or more people would be required to pay to \$15,000 in a 6-month period. These state law changes have been incorporated into the Department's BadgerCare Employer Verification Action Plan, and the Department is currently beginning the process of implementing these changes.

Introduction

The BadgerCare program was created to provide health insurance for low-income families and children who are not eligible for Medicaid and who do not have access to employer sponsored health insurance. Low-income families who do not meet Medicaid eligibility requirements can qualify for BadgerCare if family income after certain deductions is at or below 185% of the federal poverty level. Family income must remain under 200% of the federal poverty level for the family to remain eligible. To be eligible, families can not have, or have had, insurance in the past 3 months or have had access to a group plan in which the employer pays at least 80% of the monthly premium. Families whose income is above 150% of the federal poverty level are responsible for paying a monthly premium equal to 5% of their income, after certain deductions. In January 2005, approximately 17% of BadgerCare recipients were paying a premium.

BadgerCare grew steadily after it started in April 1999. By January 2004, over 114,000 persons were enrolled. Over 90% of the BadgerCare recipients are in families with at least one income-earning adult. In comparison less than 20% of AFDC and AFDC-related recipients are in families with at least one income earning adult member.³

State law (the 2003-2005 Biennial Budget Act, 2003 Wisconsin Act 33) mandated that as a condition of BadgerCare eligibility, every employed member of the family must provide verification of earnings and health insurance access/coverage status from his/her employer.

A family is eligible for health care coverage under this section if the family meets all of the following requirements: 49.665 (4) (a)... Each member of the family who is employed provides verification from his or her employer, in the manner specified by the department, of his or her earnings, of whether the employer provides health care coverage for which the family is eligible, and of the amount that the employers pays, if any, toward the cost of the health care coverage, excluding any deductibles or co-payments required under the coverage. 49.665 (4) (a) 3m

Additional funding for local agency administration for this additional task was not included when this provision passed. In order to alleviate a portion of the workload associated with the generation, mailing, mail receipt, data entry and filing associated with 150,000 additional verification forms --and to assure that the policy was implemented uniformly across the state-- DHFS instituted a centralized processing solution for the employer verification (EVF) process.

Under the new EVF process, BadgerCare recipients and applicants were required to verify earnings and health insurance access/coverage using the state Employer Verification of Earnings (EVF-E) and Employer Verification of Health Insurance (EVF-H) forms. To minimize the number of different forms that were sent to employees and handed to employers, DHFS consolidated the BadgerCare Employment Verification form with the new hire/employer verification form that had been implemented in the automated system in September 2003. In

³ Division of Health Care Financing "Medicaid Services to Low Income Families" March 3, 2005.

addition to being used for BadgerCare, the Employer Verification of Earnings (EVF-E) form is used by FoodShare, Medicaid, Child Care, SSI Caretaker supplement and W-2 to verify earnings when pay stubs are not available.

After the new employer verification (EVF) process was implemented in May of 2004, the BadgerCare caseload began to decline, and it declined far more than was expected. Prior to implementing the new EVF process it was estimated that the projected BadgerCare caseload would be 6% less as a result of the EVF provision. This decline was expected to occur over a 12-month period, the amount of time required to complete a full year of annual reviews for current BadgerCare recipients. However, five months after the new requirements were implemented (October 2004), the number of recipients was 15.6% less than in the month before the new requirements was implemented (April 2004). And, when the reasons for denying applicants or for terminating existing BadgerCare clients were tabulated, it was clear that many applicants were being denied and cases terminated because completed EVF forms were not returned as required.

Evaluation Approach

The Department was monitoring BadgerCare enrollment and was concerned about the decline in the caseload after the new EVF process was implemented. The Secretary of the Department asked the Program Evaluation and Audit Section in the Office of Strategic Finance to review the new process to determine why completed employer verification forms were not being returned as required and to advise the Secretary of the Department and the Administrator of the Division of Health Care Financing as to possible causes and solutions. This report summarizes information that was collected in order to understand why the EVF forms were not being returned as required. Information summarized in this report was obtained from a variety of sources including:

- an analysis of Medicaid caseload data
- in person interviews of income maintenance workers in selected counties
- a web-based survey of income maintenance workers throughout the state
- telephone interviews of a small number of employers of persons denied BadgerCare due to EVF requirements
- an analysis of statistical data on persons denied BadgerCare at application or terminated from the BadgerCare caseload solely due to the EVF requirements.

This report also includes a report by APS Healthcare, Inc. which summarizes a pilot phone survey of persons denied or terminated from BadgerCare in September 2004 due to the EVF process.

The Department has made a number of important improvements to the EVF process since it was first implemented in mid-May. Additional improvements identified in the Department's BadgerCare Employer Verification Action Plan described in the Executive Summary to this report will also be implemented. The rest of this report presents our findings regarding the EVF process.

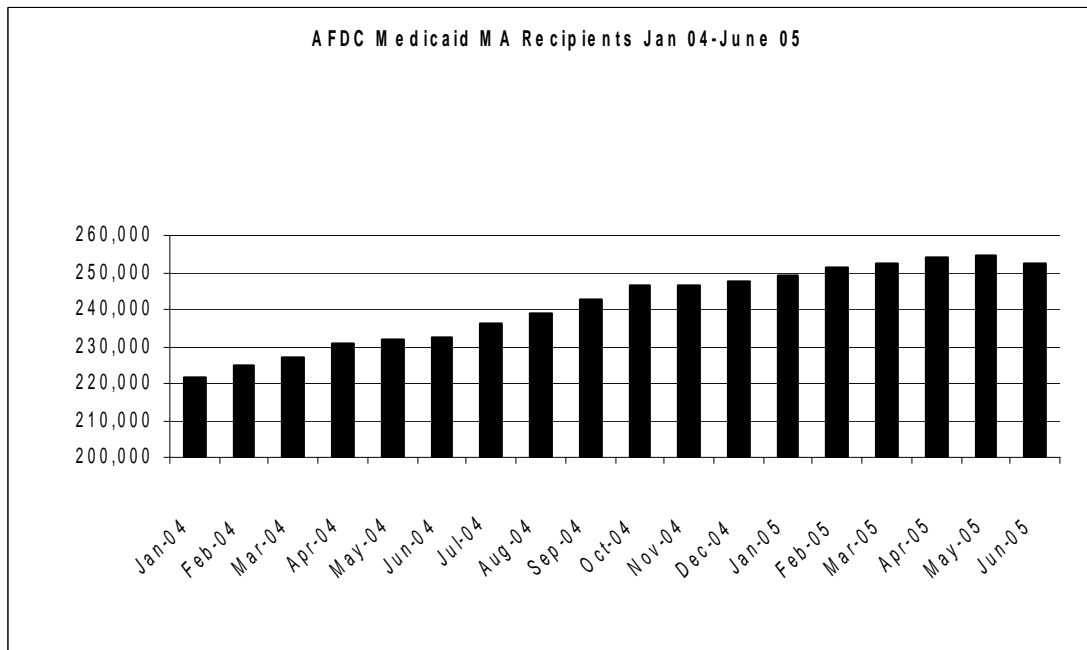
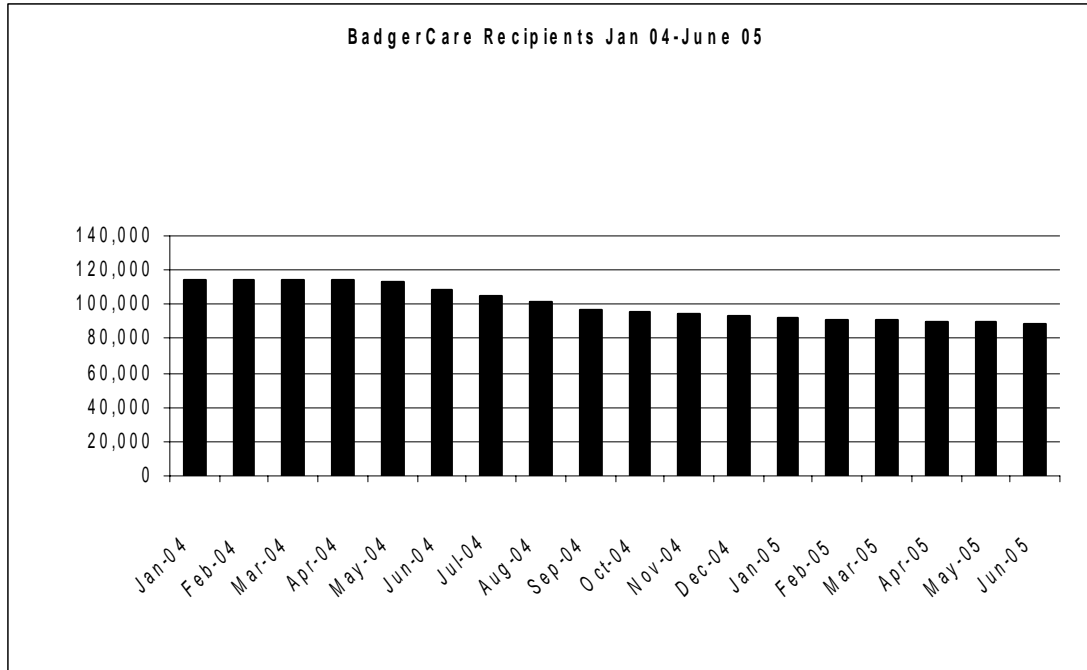
Decline in BadgerCare Caseload

After the new EVF process was implemented in mid-May, the BadgerCare caseload declined by approximately 4,000 recipients per month for the following four months. The decline in the BadgerCare caseload subsequently began to lessen. In the last three months of 2004, the BadgerCare caseload declined by less than 2,000 recipients per month. The decline in the BadgerCare caseload immediately after the EVF process was implemented occurred when the other Family MA AFDC caseload was growing.⁴

BadgerCare and AFDC MA Caseload December 2003-June 2005

Month	BadgerCare Recipients	Change over Prior Month	AFDC MA Recipients	Change over Prior Month
Dec-03	114,222		219,595	
Jan-04	114,711	489	221,788	2,193
Feb-04	114,023	-688	224,924	3,136
Mar-04	114,237	214	227,283	2,359
Apr-04	113,829	-408	230,572	3,289
May-04	112,632	-1,197	231,704	1,132
Jun-04	108,634	-3,998	232,535	831
Jul-04	104,996	-3,638	236,042	3,507
Aug-04	100,949	-4,047	238,989	2,947
Sep-04	97,131	-3,818	242,698	3,709
Oct-04	96,042	-1,089	246,255	3,557
Nov-04	94,257	-1,785	246,400	145
Dec-04	93,030	-1,227	247,822	1,422
Jan-05	91,846	-1,184	248,937	1,115
Feb-05	91,272	-574	251,145	2,208
Mar-05	91,105	-167	252,201	1,056
Apr-05	90,017	-1,088	254,221	2,020
May-05	89,494	-523	254,603	382
Jun-05	88,725	-769	252,664	-1,939

⁴ Information on the Medicaid caseload can be found at the Department's Medicaid website <http://dhfs.wisconsin.gov/medicaid8/caseload/enrollment/enrollment.htm>

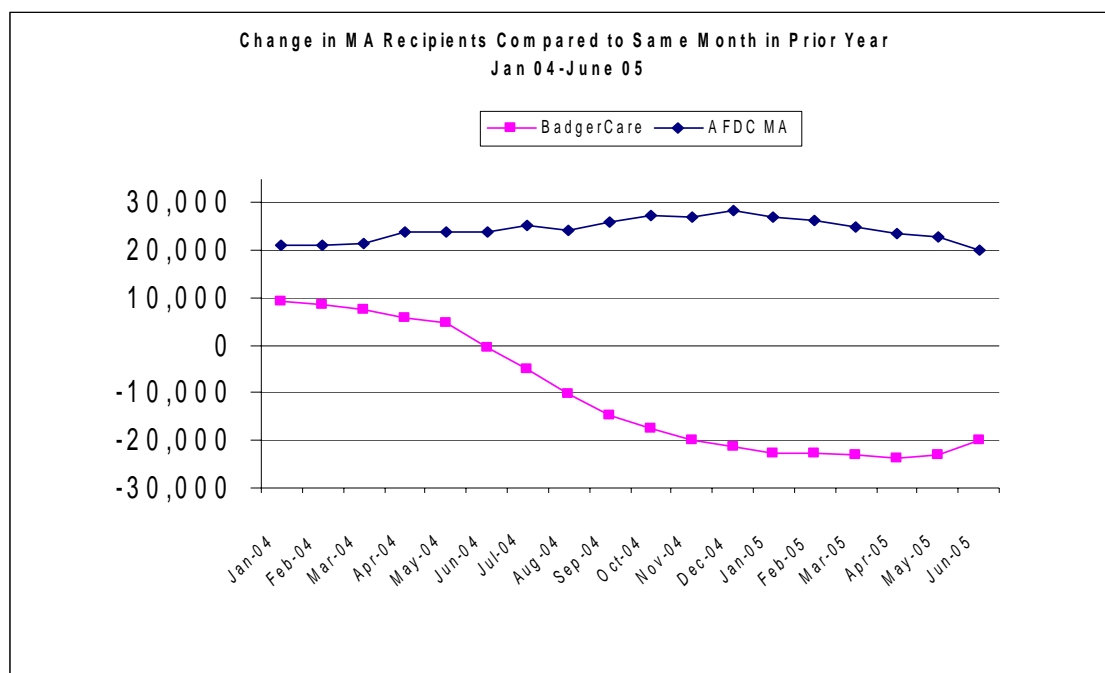


The following section of this report analyzes the decline in the BadgerCare caseload after the new EVF requirements were implemented and the extent to which the BadgerCare caseload decline was due to the new EVF requirements rather than to other factors. Improvements to the EVF process after the new requirements were implemented are then described and their possible role in the lessening of the caseload decline seen in the last months of 2004 is discussed.

Analysis of Decline in BadgerCare Caseload

There are various ways to assess changes in the BadgerCare caseload. One is to compare the caseload to caseload projections. A number of caseload projections for BadgerCare were considered as part of the 2003-05 biennial budget process. These projections were based on information available at the time, and they were necessarily limited by uncertainties associated with changing economic trends and with implementing the new premium and EVF requirements for BadgerCare. Overall it was expected that the projected BadgerCare caseload would be 6% less as a result of the new EVF process. The reduction in the caseload was expected to occur over a 12-month period, the amount of time required to complete a full year of annual reviews for current BadgerCare recipients. However, as noted, the actual impact on the caseload was considerably greater than expected.

Another way to assess changes in the BadgerCare caseload is to compare the caseload for a given month to the caseload for that same month in the prior year. This approach has the advantage of controlling for seasonal variation in the caseload. After the new EVF process was implemented in mid-May (month five in the following graph) the BadgerCare caseload fell below the level for the same month in the prior year. And each month since then the BadgerCare caseload has continued to be less than the caseload in the same month in the prior year. In comparison, the AFDC MA caseload was, and continues to be, greater than the caseload for the same month in the prior year.



The following table indicates the extent to which the caseload declined overall and within client subgroups such as premium payers. After the new EVF process was implemented in mid-May 2004, declines were seen in each of the BadgerCare client groups. By December of 2004, the number of BadgerCare recipients was 18.6% less than it was in December of 2003. Initially the largest declines in the BadgerCare caseload relative to the same month in the previous year were among premium payers. By the end of 2004, the amount of decline was similar in each of the recipient groups.

**Percentage Change in BadgerCare Recipients
Compared to Same Month in Prior Year by Type of Recipient**

Month	Total Caseload	Not Premium Payers	Premium Payers	Adult	Child
Jan-04	8.9%	9.7%	4.7%	9.6%	7.3%
Feb	8.2%	9.5%	2.3%	9.1%	6.5%
Mar	7.1%	8.1%	2.4%	8.1%	5.1%
Apr	5.3%	7.2%	-4.5%	6.4%	2.9%
May	4.3%	4.7%	2.6%	5.1%	2.8%
Jun	-0.5%	1.7%	-10.9%	0.4%	-2.3%
Jul	-4.5%	-2.7%	-13.7%	-3.8%	-5.9%
Aug	-9.3%	-7.5%	-18.1%	-8.8%	-10.2%
Sep	-13.1%	-11.8%	-19.2%	-12.7%	-13.8%
Oct	-15.4%	-14.2%	-21.3%	-15.1%	-16.2%
Nov	-17.4%	-16.5%	-21.5%	-16.8%	-18.5%
Dec	-18.6%	-18.2%	-20.5%	-17.9%	-19.9%
Jan-05	-19.9%	-19.8%	-20.4%	-19.2%	-21.4%
Feb	-20.0%	-20.5%	-17.1%	-19.5%	-20.9%
Mar	-20.2%	-20.7%	-17.8%	-19.7%	-21.4%
Apr	-20.9%	-21.3%	-18.9%	-20.4%	-22.1%
May	-20.5%	-21.1%	-17.6%	-19.8%	-22.0%
Jun	-18.3%	-19.0%	-14.5%	-16.8%	-19.9%

Note: The percentages of adult and child recipients for June are estimated based on 89,301 of the 88,725 BadgerCare recipients.

Attributing Caseload Decline to the EVF Process

The direct impact of the EVF requirements on the BadgerCare caseload is shown by the number of applications denied and recipients terminated due to the EVF process. Because there are many possible reasons for denying BadgerCare eligibility, and multiple reasons can be coded for individual eligibility decisions, the Division of Health Care Financing has developed an algorithm to identify eligibility denials that are due to the EVF process as opposed to other reasons.

According to the HCF algorithm, persons are counted as denied or terminated due to the EVF process if they have one or more of the four possible EVF failure reasons and if they are not also ineligible for BadgerCare for a reason other than failing to provide other (non EVF) verification.⁵ The four possible EVF failure reasons include:

- Did not verify health insurance information for BadgerCare
- Did not verify earnings for BadgerCare
- EVF-H not signed
- EVF-E not signed.

Persons denied or terminated due to the EVF process are shown in the “No EVF” column of the following tables.

After the new EVF requirements were implemented, they began to account for roughly 5% of the denials at application and for approximately 14% of the terminations of BadgerCare recipients. This was equivalent to almost all of the increase in application denials and terminations seen during this period of time.

The number of applications denied in a given month typically is more than 10 times greater than the number of recipients terminated that month. Thus even though the new EVF requirements had a greater relative impact on terminations than they did on program applications, there are far more BadgerCare applications denied than there are persons terminated from the BadgerCare caseload due to the new EVF requirements.

While the HCF algorithm is useful in attributing terminations and denials to the EVF process, it does not identify the total number of persons who do not meet the EVF requirements in a given month. More persons do not meet the EVF requirements than are denied/terminated due to the

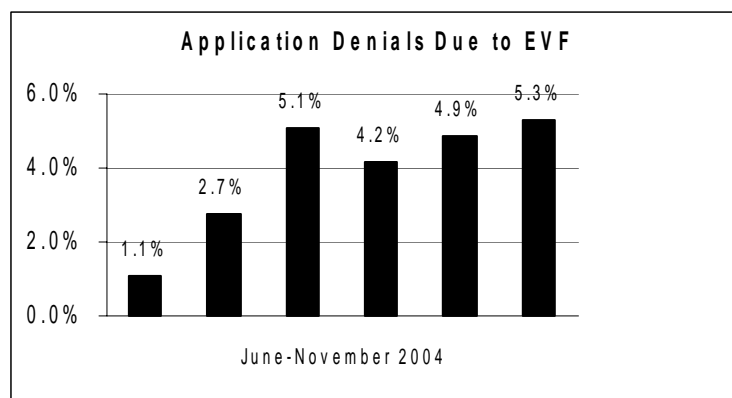
⁵ The HCF algorithm includes persons with EVF failure reasons even if they also have other (non EVF) verification failure reasons in order to avoid underestimating the scope of the EVF-related terminations and denials. The Division of Health Care Financing has found a number of examples of employment screens in CARES updated by workers in such a way that the system will fail the cases for both lack of EVF and lack of other (non EVF) verification. Persons with other failure reasons such as excess income or residency are not counted as being denied or terminated due to the EVF process because, if someone was ineligible for BadgerCare for some other reason, it did not matter that they failed to turn in a complete EVF, they were still going to be ineligible.

EVF process in a given month. For example, a data extract created for this evaluation showing all persons with one or more of the four possible EVF denial or termination reasons in September 2004 included 3,166 persons. In comparison, the Division of Health Care Financing's algorithm showing persons denied/terminated due to the EVF process in September included just 2,611 persons.

Application Denials Due to the EVF Process

“Application Denials” include persons applying for BadgerCare for the first time as well as on-going cases that have already been terminated or denied in a previous month for not completing EVFs or for other reasons. Currently it is not known if the real number of new ‘denials’ is in the thousands or just hundreds per month.

In the 6-month period after the EVF process was implemented, application denials increased by an average of 2,737 families per month or by 5.6% over the average number in the prior 9-month period. Once the new EVF requirements were implemented, they began to account for roughly 5% of the denials at application. Almost all of the increase in denials in this period of time was due to the new EVF requirements.



In addition to increased denials due to the EVF process (+1,955), increased denials were also seen in the categories of access to insurance (+552.8), excess income (+250.6) and failure to provide other (non EVF-related) verification (+170.0).

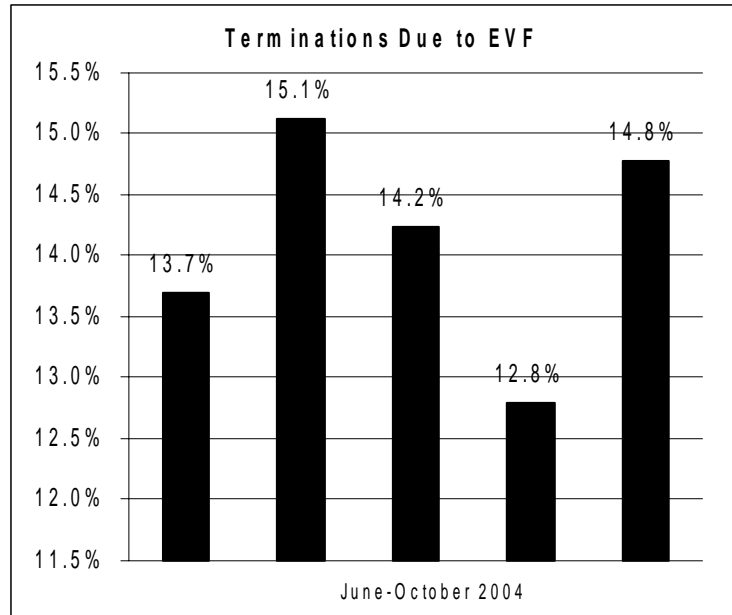
The greatest number of denials occurred in April 2004--the month the new change was announced but prior to the May 14th implementation of the new EVF process.

Application Denials-- Before and After May 2004 By Reason							
	No EVF	Access To Insurance	Excess Income	Failure to Verify	Other	Premium not Paid	Total
Aug 03	0	7620	2730	1230	32030	690	44300
Sept	0	7160	2550	950	32290	990	43940
Oct	0	8560	2200	770	35470	880	47880
Nov	0	7730	2450	700	32590	1010	44480
Dec	0	7390	2130	870	31630	1080	43100
Jan 04	0	10190	2610	830	37110	980	51720
Feb	0	7920	2250	940	34960	970	47040
March	0	8600	2440	980	33820	1250	47090
April	0	11530	3270	1640	49550	1170	67160
<i>Total</i>	0	76700	22630	8910	319450	9020	436710
<i>Average</i>	0	8522.2	2514.4	990.0	35494.4	1002.2	48523.3
May	160	7370	2670	1050	31090	1360	43700
June	630	11490	3350	1330	38580	1930	57310
July	1370	8740	2600	1270	34960	940	49880
August	2580	8140	2560	1140	35630	950	51000
Sept	2050	8590	2500	1110	34030	930	49210
Oct	2400	8670	2640	940	34040	550	49240
Nov	2700	8820	2940	1170	34460	830	50920
<i>Total</i>	11730	54450	16590	6960	211700	6130	307560
<i>Average</i>	1955.0	9075.0	2765.0	1160.0	35283.3	1021.7	51260.0
Change*	+1955.0	+552.8	+250.6	+170.0	-211.1	+19.4	+2736.7

*Change represents average after May minus average before May. May data are excluded from the analysis because the EVF policy was implemented in the middle of the month. Pre and post comparisons are based on the maximum number of months of data available at the time the analysis was done. Data included in this table were provided by the Division of Health Care Financing.

Recipients Terminated Due to the EVF Process

In the 5-month period after the new EVF process was implemented, BadgerCare terminations increased by an average of 542 cases per month or by 12.5% over the average number of terminations per month in the prior 10-month period. Once the EVF process was implemented, it began to account for approximately 14% of the terminations. The new EVF requirements accounted for the largest share of the increase in terminations during this period of time.



The period following implementation of the new EVF process saw both increases and decreases in a number of the key reasons for terminations. In addition to the cases terminated due to the EVF process (+686.2), increased terminations were also seen for no annual review (+216.1). Collectively the new EVF process and lack of an annual review account for nearly all of the increase in terminations after May 2004. Slight increases were also seen for excess income (+30.2) and for residency (+5.3). However, declines were seen for the other key reasons, most significantly for premium not paid (-234.9) and for access to insurance (-105.7).

Terminations-- Before and After May 2004 by Reason									
	No EVF	No Annual Review	Excess Income	Access to Insurance	Failure to Verify	Residency	Other	Premium not Paid	Total
July 2003	0	476	490	613	393	138	1043	752	3905
Aug	0	454	603	601	477	170	1080	815	4200
Sept	0	504	606	586	416	130	1129	858	4229
Oct	0	467	525	592	456	165	1230	941	4376
Nov	0	551	551	542	515	138	1087	969	4353
Dec	0	473	573	846	572	120	1147	1061	4792
Jan 2004	0	512	406	952	380	98	960	1227	4535
Feb	0	515	507	942	418	80	946	691	4099
March	0	491	571	840	501	96	1078	669	4246
April	18	702	602	509	563	104	1035	936	4469
<i>Total</i>	18	5145	5434	7023	4691	1239	10735	8919	43204
<i>Average</i>	1.8	514.5	543.4	702.3	469.1	123.9	1073.5	891.9	4320.4
May	294	664	817	641	690	112	1235	810	5263
June	720	643	620	618	510	136	1110	897	5254
July	761	790	621	739	408	123	977	614	5033
August	697	706	531	651	489	150	1080	590	4894
Sept	561	761	507	448	400	140	987	583	4387
Oct	701	753	589	527	403	97	1074	601	4745
<i>Total</i>	3440	3653	2868	2983	2210	646	5228	3285	24313
<i>Average</i>	688.0	730.6	573.6	596.6	442.0	129.2	1045.6	657.0	4862.6
Change*	+686.2	+216.1	+30.2	-105.7	-27.1	+5.3	-27.9	-234.9	+542.2

*Change represents average after May minus average before May. May data are excluded from the analysis because the EVF policy was implemented in the middle of the month. Pre and post comparisons are based on the maximum number of months of data available at the time the analysis was done. Data included in this table were provided by the Division of Health Care Financing.

The 18 cases shown terminated for "No EVF" in April were in cases where applications made in April were processed after the EVF logic was added to CARES in May. While they were eligible for April benefits, the workers indicated that no EVFs were received, which resulted in CARES closing the BadgerCare cases for May for lack of EVF verification. Since these cases received BadgerCare in April and closed April 30th, they are listed as April terminations.

Other Factors Contributing to Caseload Decline

Factors other than the new EVF requirements also could have contributed to the BadgerCare caseload decline. Other possible factors include a decline in the number of BadgerCare applicants, the impact of the premium increase implemented January 2004, an increase in eligibility denials for BadgerCare applicants/recipients for other (non EVF) reasons, or changes in the caseload such as a decrease in the number of Family Medicaid recipients moving into the BadgerCare program.

The number of Family Medicaid recipients moving into BadgerCare did decline at the same time the new EVF requirements were implemented, and it is likely that this contributed to the BadgerCare caseload decline at this time. The higher premium also may have played a role.

It is not likely that the decline in the BadgerCare caseload was due to an overall decline in BadgerCare/Medicaid applicants because enrollment in the other Family Medicaid programs was increasing (by an average of approximately 4,000 recipients per month) when the decline in the BadgerCare caseload occurred. Increases in eligibility denials for other (non EVF) reasons also did not appear to be a contributing factor. The average number of BadgerCare applications denied and persons terminated for non EVF reasons actually declined (by 764.9 and 32.56 per month respectively) in the 4-month period after the new EVF requirements were implemented in comparison to the 4-month period before they were implemented.

Movement Between Family Medicaid and BadgerCare

The number of Family Medicaid recipients moving into BadgerCare, which has higher family income level criteria than Family Medicaid, began to decline significantly in May 2004. At the same time, the number of persons moving out of BadgerCare into Family Medicaid remained fairly steady. Essentially this contributed to higher Family Medicaid caseloads and lower BadgerCare caseloads.

The change in movement between BadgerCare and Family Medicaid in the first three full months after the verification process was implemented resulted in over 1,000 fewer persons in BadgerCare. This was equivalent to approximately one-fourth of the decline in BadgerCare cases during this period of time. But in October of 2004 the number of Family Medicaid recipients moving into BadgerCare began to increase. By December of 2004 the number of persons moving into BadgerCare from Family Medicaid and the number moving out of BadgerCare into Family Medicaid were becoming similar. This contributed to the lessening of the decline in BadgerCare cases seen in the last three months of 2004.

Higher BadgerCare Premium

In January of 2004 the Badger Care premium was increased from 3% to 5%. This also was associated with a decline the BadgerCare caseload, although the impact was much less than that of changes in migration between Family Medicaid and BadgerCare. Declines in premium payers represented about 15 % of the decline in BadgerCare caseload in the first three full months after the verification process was implemented.

Impact of Improvements to EVF Policy and Procedures

After the new EVF requirements were implemented, the Division of Health Care Financing made a number of changes to improve the EVF process and additional refinements are planned. Policy changes after the new EVF requirements were implemented were compared to monthly changes in the caseload. This did not show any strong relationships between the various procedural and policy changes that have been made to date and changes in the BadgerCare caseload decline. However, it is possible that collectively these changes contributed to the lessening of the caseload decline, which occurred in the last three months of 2004. Following is a summary of key policy and procedure changes that have been made to improve the EVF process.

Employer Verification Policy and Process Timeline (Prepared by DHCF Bureau of Eligibility Management)

September 2003 – 2003 Wisconsin Act 33 is enacted. It contains the provision requiring the Department to implement the employer verification policy for BadgerCare. Savings are projected to be a 6% reduction in BadgerCare recipients in an 18-month period.

November 2003 – The Department, after considering alternatives for implementing the BC EVF policy and process without any administrative funding for state or local administration, decides on a centralized processing option with local agencies retaining the eligibility determination responsibilities.

January 2004 – BadgerCare premium is increased to 5% from 3%

April 23, 2004 – Operations Memo describing EVF policy and process is sent to field.

May 14, 2004 – DHFS implements the EVF policy and process.

July 2004 – After reviewing initial auto-population and exception processing results, DHFS changed the ‘exception logic.’ The change allowed CARES to assume a deduced answer for forms with a blank answer to the ‘are you currently working’ question, but where the employer has entered information about employment or about an end date. This change increased the auto-population rate for EVF-H from 45% to 80%. It did not affect the EVF-E auto-population statistics.

August 2004 – As requested by local agencies, DHFS changed CARES to allow local agencies with Change Centers (Milwaukee, Dane, Outagamie, Lacrosse, Washington & Racine) to choose to have certain EVF data and alerts sent to a Change Center worker or to the primary assigned worker.

At local agency and advocate urging, DHFS changed the CARES logic to allow for a 20-day return requirement for EVFs for BadgerCare, rather than the 10 days allowed previously.

FoodShare (11 days), Child Care (7 days) and W-2 (7 days) change processing requirements remain the same.

October 2004 – At local agency suggestion, CARES is changed to allow EVF-E/H data to update the earnings CARES screens even if the worker has changed those screens by entering a ‘not verified’ code (NV or QV), rather than identifying these EVFs as exceptions and requiring worker intervention.

December 2004 – Acting upon local agency suggestion, DHFS added a new CARES option for local agency workers when requesting verification of earnings, so that workers can either generate the EVF-E or a letter asking for pay check stubs as verification of earnings.

Profile of Persons Denied or Terminated from BadgerCare Due to EVF Requirements

In order to determine if persons who were denied BadgerCare eligibility due to the new EVF requirements had any unique characteristics that might help explain why completed EVF forms were not being returned as required, data from the Client Assistance for Re-employment and Economic Support (CARES) BadgerCare/Medicaid automatic eligibility system was analyzed. Data was analyzed from a CARES data extract listing clients who were denied application or closed from BadgerCare during September 2004 and who had one or more of the four possible EVF failure reasons. CARES lists between one and three reasons for the BadgerCare ineligibility decisions. There are several dozen possible reasons for BadgerCare ineligibility and four of these reasons specifically relate to the employer verification of earnings (EVF-E) and employer verification of health insurance (EVF-H) requirements.

In total, 3,166 clients were identified who had at least one of the four possible EVF denial reasons. Most (2,515 or 79%) of the 3,166 people included in this extract were BadgerCare applicants who were deemed to be ineligible for BadgerCare.⁶ In addition, there were 651 assistance groups (the assistance group includes all people in the household who are requesting BadgerCare and those who are pulled in by their relationship to the requestor) who had been eligible for BadgerCare in August 2004, but lost their BadgerCare eligibility effective August 31, 2004, and did not receive any BadgerCare benefits during September 2004.

Most of these assistance groups were not denied eligibility solely due to the EVF requirements. There were 2,200 assistance groups who had one or more of the four possible EVF denial reasons and also had other factors that made them ineligible for BadgerCare. Just 966 only had one or more of the four possible EVF reasons. These 966 persons were denied BadgerCare eligibility solely because completed EVF forms were not returned as required. These persons were determined to be ineligible for BadgerCare solely due to the EVF requirements.

These 966 persons represented a portion of the 2,611 persons identified by the HCF algorithm as being denied/terminated from BadgerCare due to the EVF process in September 2004. The HCF algorithm identified more people because it includes persons with EVF failure reasons that also have other (non EVF) verification failure reasons.

⁶ It would be expected that most of the persons in the extract would be applicants because in any given month the number of applicants denied is far greater than the number of recipients terminated. Because denied BadgerCare applicants include persons applying for BadgerCare for the first time as well as on-going cases that have already been terminated or denied in a previous month for not completing EVFs or for other reasons, it is not known how many of the denied applicants were former BadgerCare recipients.

Reasons for BadgerCare Ineligibility

Persons Ineligible Solely Due to EVF Requirements

Among the 966 assistance groups who were ineligible solely due to the EVF process, failure to submit the verification of health insurance information was the most common reason for BadgerCare ineligibility. This reason was listed for 82% of these ineligible clients. In most (86%) of these cases, the verification of income form was returned.⁷

The specific EVF-related ineligibility reasons among clients who were ineligible solely due to the EVF process were:

EVF Ineligibility Reasons for Persons Having Only EVF Ineligibility Reasons

Ineligibility Reason*	Number
Did Not Verify Health Insurance Information for BadgerCare	794
Did Not Verify Earnings for BadgerCare	138
EVF-H Not Signed	50
EVF-E Not Signed	26

*Of the 966 clients, 945 had one EVF-related reason for BadgerCare ineligibility and 21 clients each had three EVF-related reasons for BadgerCare ineligibility.

Persons Ineligible Due to EVF and Other Requirements

Among the 2,200 assistance groups that were ineligible due to the EVF process and other non-EVF reasons, 79% failed to submit both the verification of health insurance and the verification of income forms. Failure to verify access to health insurance was more common than failure to verify income. In most (92%) of the cases, the completed verification of health insurance form was not submitted as required. In 86% of the cases the completed verification of earnings form was not submitted as required. It should be noted that for some of these persons, earnings could have been verified in other ways such as by pay stubs.

The specific EVF-related ineligibility reasons among the people ineligible due to the EVF and for other reasons such as excess income were:

EVF Ineligibility Reasons for Persons with EVF and Other Ineligibility Reasons

Ineligibility Reason*	Number
Did Not Verify Health Insurance Information for BadgerCare	2,013
Did Not Verify Earnings for BadgerCare	1,895
EVF-H Not Signed	43
EVF-E Not Signed	31

*Of the 2,200 clients, 1,284 had two EVF-related reasons and 916 had three EVF-related reasons for BadgerCare ineligibility.

⁷ Since the failure to verify earnings was not listed as an ineligibility reason, it was assumed that the EVF-E was submitted or that income was verified via pay stubs.

As noted, these assistance groups also had eligibility problems that were not EVF related. In many cases (51%) they failed to submit other verification information in addition to not completing the employer verification process. The types of non-EVF reasons listed for BadgerCare eligibility were:

Other Ineligibility Reasons for Persons with EVF and Other Ineligibility Reasons

Ineligibility Reason	Percent
Other Verification Information Missing*	51%
Excess Income	37%
Other Reasons*	12%

* Other verification information missing could include failing to verify other sources of income such as child support for example.

* Other reasons included: no eligibles in family (N=34), fewer eligibles in family (N=26), incomplete eligibility review (N=24), non-residency (N=22), restrictive enrollment related (N=21), childcare expenses reduced (N=18), and premium not paid (N=18).

Summary for Total Group

Following is a summary of the reasons for ineligibility across both groups.

EVF Ineligibility Reasons for All Persons with EVF Ineligibility Reasons

Ineligibility Reason	Persons Ineligible Solely Due to EVF (N= 966)	Persons Ineligible Also Due to Other Reasons (N=2,200)	Total (N=3,166)
Health Insurance			
EVF-H not submitted	794 (82%)	2013 (92%)	2807 (89%)
EVF-H not signed	50	43	93
Subtotal	844	2056	2900
Earnings			
EVF-E not submitted	138 (14%)	1895 (86%)	2033 (64%)
EVF-E not signed	26	31	57
Subtotal	164	1926	2090

Characteristics of Clients Denied or Terminated from BadgerCare Solely Due to EVF Requirements

This section presents descriptive information focusing just on the 966 persons denied or terminated from BadgerCare solely due to the EVF requirements. The characteristics described include language barriers and citizenship, relationship of the employed person to the casehead (the casehead is usually the primary person in the case for purposes of eligibility determination) the location of the employer's home office and the self-declared income levels and sources of income. In the next section of this report, these 966 persons are compared to the overall BadgerCare caseload and to 2,200 persons denied or terminated from BadgerCare for EVF as well as for other reasons.

Language Barriers and Citizenship

A relatively small percentage of the assistance groups that were denied or terminated from BadgerCare solely because completed EVF forms were not returned as required had language barriers. CARES indicated that 10% of the employed persons in these assistance groups had limited English proficiency. Eight percent had such severe English limitations that their official notices were to be printed in Spanish. (Spanish is the only non-English language in which BadgerCare official notices are printed.)

In most (89%) of the assistance groups that were ineligible for BadgerCare solely because completed EVF forms were not returned as required, the employed person was a U.S. citizen. Five percent of these employed persons were MA eligible, qualifying alien non-citizens, and 6% were non-qualifying aliens who were ineligible for benefits.

Relationship of Employed Person to the Casehead

In 28% of the cases that were deemed ineligible solely because completed EVF forms were not returned as required, the employed person was not the assistance group casehead. The relationships of these employed persons to the casehead were spouse – 174 cases, other relative – 24 cases, and non-relative – 75 cases. All letters that explain EVF requirements and all EVF forms are sent to the casehead, even if that person is different from the employed person. If the employed person is not the casehead, the casehead needs to be sure the employed person is aware of the EVF requirements.

Location of Employer's Home Office

In some cases, the employer's home office was outside Wisconsin. This poses potential problems for timely submission of the EVF. In 58% of the cases where the family was deemed ineligible solely because completed EVF forms were not returned as required, the employer had a Wisconsin address; in 6% of the cases, the employer's home office was outside Wisconsin; and, in 36% of the cases, the location of the employer's home office was missing. This suggests that in many cases reporting would need to be improved to mail the EVF forms directly to the employer.

Self-Declared Income Levels and Sources of Income

The majority (62%) of the 966 clients that were deemed ineligible solely because completed EVF forms were not returned as required had unearned income, child support, income from multiple workers in the eligibility group, or were self-employed.⁸ Twenty-three percent had unearned income from benefit programs such as social security, SSI, worker's compensation, unemployment compensation, veteran's benefits and disability insurance. Thirty-eight percent

⁸ The percentages of clients with income from multiple workers and the percentage of self-employed clients are based on incomplete information. Having income from multiple workers was not reported for 539 of the 966 cases and self-employment was not reported for 559 of the 966 cases.

had child support. Seventeen percent had income from multiple workers in the eligibility group. In addition, many clients have multiple jobs, so the actual percentage of clients with multiple income sources is greater than 62%. Each of these income sources requires verification to qualify for, or to maintain, BadgerCare eligibility. Very few (less than 2%) were self-employed.

Income Sources Reported for Persons Ineligible Solely Due to EVF Requirements

Income Source	Percent
Self-Employment	Less than 2%
Income from Multiple Workers	17%
Unearned Income:	
Benefit Programs	23%
Child Support	38%

Table values total to more than 62% because some persons had multiple sources.

The average total family income from all sources among the clients that were deemed ineligible solely because completed EVF forms were not returned as required was \$1,478 per month. Monthly income ranged from \$0 to \$5,343 per month. Among the ineligible clients, the number of people in the eligibility group ranged from 1 to 13 people.

Self-Declared Income Levels among Cases Ineligible Solely Due to EVF Requirements Compared to Income Eligibility Criteria

Assistance Group Size	# of Assistance Groups	Average Self-Declared Gross Monthly Income	Range of Self-Declared Gross Monthly Income	Eligibility Criteria for Gross Monthly Income Level for Applicants	Eligibility Criteria for Gross Monthly Income Level for Recipients
0	2	\$1,137	\$808 to \$1,466		
1	21	\$932	\$458 to \$1,295	\$1,435.29	\$1,551.67
2	258	\$1,122	\$0 to \$1,970	\$1,925.54	\$2,081.67
3	267	\$1,358	\$0 to \$2,412	\$2,415.79	\$2,611.67
4	206	\$1,653	\$0 to \$2,910	\$2,906.04	\$3,141.67
5	131	\$1,907	\$0 to \$3,370	\$3,396.29	\$3,671.67
6	56	\$1,737	\$0 to \$3,038	\$3,886.54	\$4,201.67
7	12	\$2,859	\$1,590 to \$3,823	\$4,376.79	\$4,731.67
8	6	\$2,133	\$946 to \$3,025	\$4,867.04	\$5,261.67
9	3	\$1,716	\$1,395 to \$2,249	\$5,357.29	\$5,791.67
10	2	\$3,742	\$2,140 to \$5,343	\$5,847.54	\$6,321.67
13	2	\$3,391	\$3,338 to \$3,445	\$7,318.29	\$7,911.67

Everyone shown in this table was sent an EVF and was part of an assistance group that was eligible for BadgerCare based upon the information they provided at that time. Earnings or health insurance access/coverage is not verified unless the assistance group is otherwise eligible for BadgerCare (e.g. income below the income limit, etc.). Because earnings or health insurance access/coverage are not verified unless the assistance group is otherwise eligible for BadgerCare (including having income below the income limit), clients denied or terminated due to the EVF process would not be expected to have excess self-reported income.

Consistent with this, the self-declared income level data provided by BadgerCare applicants and recipients indicates that the income level of clients who were deemed ineligible solely because completed EVF forms were not returned as required were well within the income limits for

BadgerCare eligibility. However, 2 of the 966 persons deemed ineligible solely because completed EVF forms were not returned as required had self-declared income that exceeded the eligibility criteria. Both of these persons were denied BadgerCare applicants. The Division of Health Care Financing notes that these two cases most likely had income below the limit when the recipient income limit and the appropriate deductions were applied.

Comparison to Other BadgerCare Clients

The BadgerCare report produced by OSF earlier in 2004 presented data on the demographic characteristics of all BadgerCare 2002 eligibles. These data were compared with the demographic characteristics of people who were denied or closed from BadgerCare due to the EVF requirements during September 2004.⁹

Data on three basic demographic characteristics of persons denied or closed from BadgerCare due to the EVF process during September 2004 were analyzed. These characteristics were race/ethnicity, gender and type of county of residence (i.e., urban vs. rural vs. urban metropolitan). The characteristics of the employed person were reviewed for this analysis. Information is presented separately for the 966 assistance groups who were denied or terminated from BadgerCare solely because completed EVF forms were not returned as required and for the 2,200 who also had other reasons for being denied or closed from BadgerCare.

Race/Ethnicity

Hispanic people had a higher incidence of BadgerCare ineligibility due to the EVF process than the overall BadgerCare caseload. Nearly one-fifth (17%) of the people who were ineligible for BadgerCare benefits solely because completed EVF forms were not returned as required were Hispanic. In comparison, 8% of the overall BadgerCare caseload during 2002 was Hispanic. In contrast, as noted in the previous section, a relatively small percentage of the assistance groups that were denied or terminated from BadgerCare solely because completed EVF forms were not returned as required had language barriers reported in CARES. While it is possible that language barriers are under reported, it may be that other explanations such as less cooperation on the part of employers contribute to this pattern.

Other minorities also had a somewhat higher incidence of BadgerCare ineligibility due to EVF process than did the overall BadgerCare caseload. Thirty-seven percent of the people who lost/were denied BadgerCare benefits solely due to failure to submit complete employer verification information were non-white. In comparison, 29% of the overall BadgerCare caseload during 2002 was non-white.

⁹ Wisconsin Department of Health and Family Services, Office of Strategic Finance, Evaluation Section, BadgerCare Evaluation, July 2004.

Race/Ethnicity of Persons with EVF Ineligibility Reasons Compared to BadgerCare Caseload

Race/Ethnicity	Persons with EVF Ineligibility Reasons		All 2002 BadgerCare Eligibles
	Denied/Closed Solely Due to EVF Process	Denied/Closed Due to EVF and Other Reasons	
White	63%	73%	71%
African American	18%	12%	16%
Hispanic	17%	12%	8%
Asian	4%	4%	3%
Native American	2%	2%	2%

Gender

In 68% of the cases where the family lost or was denied BadgerCare benefits solely because completed EVF forms were not returned as required, the employed person was female. This proportion of females is slightly higher than the overall 2002 adult BadgerCare caseload (i.e., 60% female).

Gender of Persons with EVF Ineligibility Reasons Compared to BadgerCare Caseload

Gender	Persons with EVF Ineligibility Reasons		All 2002 BadgerCare Eligibles
	Denied/Closed Solely Due to EVF	Denied/Closed Due to EVF and Other Reasons	
Females	68%	63%	60%
Males	32%	37%	40%

County of Residence

Urban metropolitan counties other than Milwaukee comprised a disproportionately high percentage of the clients determined ineligible solely because completed EVF forms were not returned as required.¹⁰ While these counties contained 38% of the total BadgerCare caseload, they accounted for 51% of clients who were deemed ineligible solely due to the EVF process. The proportion of Milwaukee clients who were deemed ineligible solely due to the EVF process (21%) was slightly less than their composition of the overall BadgerCare 2002 caseload (23%).

¹⁰ The US census has established standards to designate each Wisconsin county as rural (N=39), urban metropolitan (N=20) or urban non-metropolitan (N=13). The designations are based on the total population of the county and its proximity to or containment of large population based cities or urbanized areas.

County of Residence of Persons with EVF Ineligibility Reasons Compared to BadgerCare Caseload

County of Residence	Persons with EVF Ineligibility Reasons		All 2002 BadgerCare Eligibles
	Denied/Closed Solely Due to EVF	Denied/Closed Due to EVF and Other Reasons	
Urban Metropolitan – Out-state Counties	51%	48%	38%
Urban Metropolitan – Milwaukee County	21%	14%	23%
Urban Non-Metropolitan	13%	18%	15%
Rural	14%	20%	24%
Tribe	Less than 1%	Less than 1%	Not Available

Premium Payers

None of the assistance groups that lost BadgerCare eligibility solely because completed EVF forms were not returned as required were premium payers. But among the applicants who were denied eligibility solely because completed EVF forms were not returned as required, 12% were designated as being responsible for paying a BadgerCare premium, had they been determined to be eligible. In addition, there were 126 applicant clients (15% of the subgroup) that were missing data on whether they would have been responsible for paying a premium. CARES does not always enter a premium payer indicator on the budget screen with denied cases. As a result, the proportion of new applicants who would have been premium payers may be higher than 12%.

If the employer offers health insurance coverage and pays 80% or more of the premium, the family would be ineligible for BadgerCare. There were no instances where access to an employer sponsored health insurance plan that paid at least 80% of the premium was cited as a reason for BadgerCare ineligibility. It should be reiterated that in the vast majority of cases denied BadgerCare eligibility due to the EVF requirements, the verification of health insurance form was not submitted.¹¹ Therefore, data regarding the availability of employer sponsored health insurance is incomplete.

¹¹ Verification of health insurance forms were not submitted by 82% of the persons ineligible solely due to EVF requirements and by 92% of persons ineligible for EVF as well as other reasons. In comparison, 14% and 86% of the persons in these groups did not submit verification of earnings forms.

Assistance groups whose income is above 150% of the federal poverty level are responsible for paying a monthly premium. Premiums are based on family size and actual gross income level with assistance groups paying 5% of their gross income in premiums. The following table presents data on the monthly premiums for BadgerCare.

Current BadgerCare Income Limits and Maximum Monthly Premiums

Family Size	Applicants			Recipients	
	Gross Monthly Income Limit	Maximum Monthly Premium (@5%)		Gross Monthly Income Limit	Maximum Monthly Premium (@5%)
1	\$1,435.29	\$71.76		\$1,551.67	\$77.58
2	\$1,925.54	\$96.28		\$2,081.67	\$104.08
3	\$2,415.79	\$120.79		\$2,611.67	\$130.58
4	\$2,906.04	\$145.30		\$3,141.67	\$157.08
5	\$3,396.29	\$169.81		\$3,671.67	\$183.58
6	\$3,886.54	\$194.33		\$4,201.67	\$210.08
7	\$4,376.79	\$218.84		\$4,731.67	\$236.58
8	\$4,867.04	\$243.35		\$5,261.67	\$263.08
9	\$5,357.29	\$267.86		\$5,791.67	\$289.58
10	\$5,847.54	\$292.38		\$6,321.67	\$316.08
For each additional person	+\$490.25			+\$530.00	

Key Findings

1. Among the persons who were denied or terminated from BadgerCare solely due to EVF requirements, failure to verify health insurance was far more likely to be the reason for ineligibility than failure to verify earnings. The number of persons determined ineligible for BadgerCare because completed EVF health insurance forms were not returned as required was more than five times greater than the number denied eligibility because completed EVF income verification forms were not returned.
2. In comparison to the overall BadgerCare caseload, persons who were denied or terminated from BadgerCare solely due to EVF requirements were twice as likely to be Hispanic (17% versus 8%). Only a relatively small percentage (10%) of the assistance groups that were denied or terminated from BadgerCare solely because completed EVF forms were not returned as required had reported language barriers on CARES. (Persons with reported language barriers on CARES include persons with limited English proficiency as well as persons whose official notices were printed in Spanish, the only non-English language in which notices of decision are generated by CARES.) While it is possible that language barriers are under reported, it may be that other explanations such as less cooperation on the part of employers contribute to this pattern.
3. In 89% of the assistance groups that were ineligible for BadgerCare solely due to EVF requirements, the employed person was a U.S. citizen.
4. In comparison to the overall BadgerCare caseload, persons who were denied or terminated from BadgerCare solely due to EVF requirements were more likely to live in an urban metropolitan county other than Milwaukee (51% versus 38%). They also were slightly more likely to be female (68% versus 60%).
5. Having unearned income or income from multiple workers may be related to not returning completed EVF forms as required. Sixty-two percent of the assistance groups who were denied or terminated from BadgerCare solely because EVF forms were not completed as required had unearned income or income from multiple workers. Multiple jobs per earner or earners per case makes it less likely that the EVF will be returned because more people need to be involved in the process.
6. Working for an employer with a home office outside of Wisconsin also may be related to not meeting EVF requirements. However this is difficult to determine because the location of the employer was unreported for a large percentage of the cases (36%) that were denied or terminated from BadgerCare solely due to EVF requirements.

Description of the EVF Process

Following is a detailed description of the work steps in the verification process.

1. CARES (DOA) generates centrally the Employer Verification Form for Earnings (EVF-E) and if needed for BadgerCare, the Employer Verification of Health Insurance form (EVF-H) as follows:
 - A. The EVF-E form is automatically generated whenever a new hire record is received for an open Medicaid, BadgerCare, FoodShare, Child Care or W-2 individual who has earnings counted in determining eligibility. CARES knows an event like a change in employment happens because either the local IM worker enters the new job into the CARES database system or the DWD State Wage Database New Hire Match occurs. This form is used because the individual would not have pay stubs to verify their income.
 - B. The EVF-E form can also be generated whenever a local IM worker chooses to verify or re-verify earnings for any IM program. Recipients can also verify their income using pay stubs or other documentation.
 - C. The EVF-E and EVF-H forms are generated whenever BadgerCare eligibility is determined by CARES and someone whose earnings count in determining BadgerCare eligibility has not had those earnings verified in the last 12 months. This could occur at the time of application, during the annual review, when a new job is added or when a Family Medicaid recipient increases earnings or ages out of Healthy Start or ends a pregnancy and BadgerCare eligibility is determined. While the employed individual can use pay stubs to take care of the obligation to verify earnings, they need to have their employer fill out the EVF-H, since there is no standard documentation that an employee has or does not have coverage/access to employer-sponsored health insurance.
2. CARES (DOA) mails one or both forms by regular mail to the mailing address reported by the individual to the local IM agency which is usually the case head of household (employed person-applicant/recipient).
3. Mail that cannot be delivered is returned to the local IM agency. The local IM agency is required to attempt to contact the casehead, but if they cannot, the local IM agency will close the case due to loss of contact.
4. Head of household receives document in the mail and opens it. There should be one or both forms plus a letter containing instructions that the person is suppose to follow. When changes have occurred in the person's employment, such as loss of employment, the applicant or recipient in the cover letter is asked to contact their local IM agency worker. The local IM agency worker will explain to the applicant/recipient when verification of earnings/insurance is still required based upon the application date, backdated eligibility requests for Medicaid and budgeting policies for Medicaid, BadgerCare and FoodShare.

5. Head of household/employed person gives the EVF to his/her employer for processing.
6. Employer completes and signs the EVF and gives it back to employee. Some times employers may need to send the form(s) to a central Corporate Human Resources office that may be located in another city of the state or in another state. Sometimes the HR office, in turn, sends them to their independent accounting firm for processing.
7. Some employers subscribe to an automated service called "The Work Number" that handles all of their payroll records and employment verifications. Employers who have signed up for this service may not return the EVF-E form, but request that the employee ask the local IM worker to use the web site to verify their earnings.
8. Employee addresses envelope, affixes stamp and sends the completed EVF back to the Central Processing Center (CPC) located in Madison at EDS.
9. The CPC sorts, opens the mail, and checks the forms for completeness, does preliminary validation and sends it to Central Scanning Unit (CSU)
10. The CSU then scans the forms to capture the data on the forms and an image of the form.
11. Prior to the scanned data extracted from the EVF being sent to CARES, the data from the form is sent through a two-stage validation process. The data is initially evaluated electronically by the system software. If no inconsistencies are found, the data is sent to CARES. Should the validation software detect inconsistencies in the data, the data is viewed manually by a human operator. The operator will take action to correct inconsistent data prior to the data being sent to CARES.
12. CARES automatically (auto-population) enters the captured data from the form on the correct screens such as earnings, insurance coverage and access or, based upon the data in CARES and provided through the EVF, the data is processed as an exception.
13. Local IM worker is alerted that the data has been updated or that there is an exception.
14. Local IM worker will then review the data that has been supplied, run eligibility, check results and confirm eligibility or review the data on special 'in box' screens in CARES when the EVF data has been processed as an exception. The worker then decides what data to enter into the earnings and health insurance access screens in CARES, before running eligibility, checking results and confirming eligibility
15. At the same time that the EVF data is being entered into CARES (as an exception or through autopopulation), an image of the form is placed in the Electronic Case File (ECF) for that case and individual (ECF will contain the images of each EVF received and scanned centrally).
16. Now the local IM worker can look at the form's image on the ECF through a secure website (No paper copy of the EVF will be sent to the local agency for their case file).

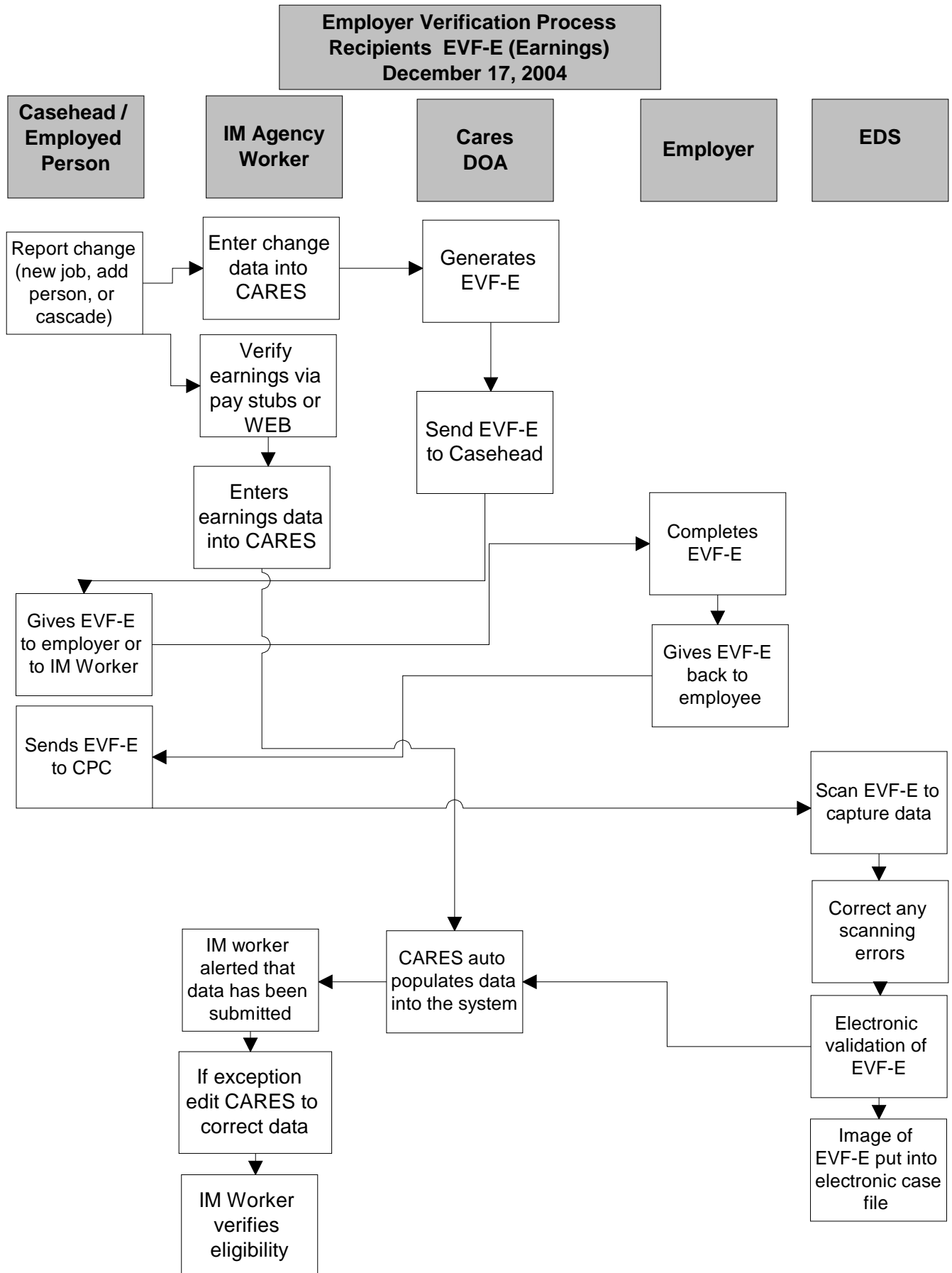
17. If the EVF is not returned within the time frame allowed for the EVF, then CARES will provide the worker with a list of overdue EVFs on a special CARES screen. The worker reviews this list, enters data into the employment screen that the EVF has not been returned, runs eligibility (the programs requiring the EVF verification will be denied or terminated) and confirms eligibility.

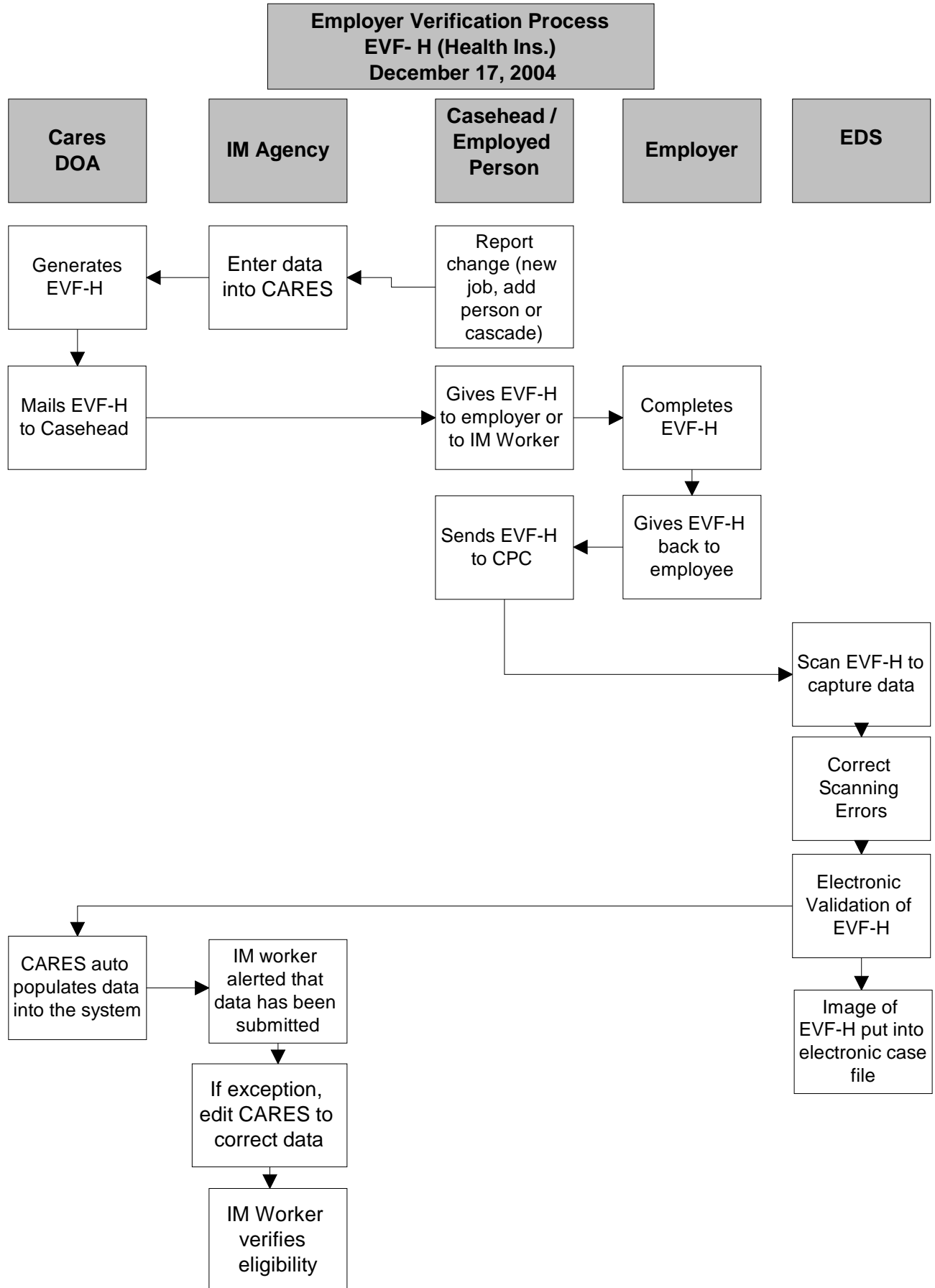
The completed process takes an average of:

From CARES Generation to Return to CPC: 9.4 days

From Receipt at CPC to Data Transmitted to CARES: 0.76 days

From Data Receipt in CARES to Worker Action: 4.5 days





Employers' Views Concerning the EVF Process

In order to obtain input from employers about the EVF process, a small number of employers were interviewed. Sample employers were identified from a CARES extract of persons who failed to meet the EVF requirements and who were denied application or closed from BadgerCare during September 2004 and who had one or more of the four possible EVF failure reasons. Seventeen of these employers were contacted by phone in late November and December 2004. The employers who were contacted were selected because they had a number of employees included on the listing of persons denied application or terminated in September. A copy of the interview questions is included in the Appendix to this report.

The employer survey indicates that it would be unusual for the EVF process to be completed with an employee taking the form to the employer, the employer completing it, and then returning it to the employee to mail back to the state. It also suggested that it is not likely that the process can typically be completed in the time frame provided.

Awareness of Importance of Forms

First we found lack of awareness of the importance of the forms and of the consequence for employees if they are not completed and within the required time frame. When we contacted employers, there was some confusion about what forms we were referring to. Many of the employers did not recall verification forms specific to the BadgerCare program. In total, just half of the respondents reported that they personally had completed an employer verification form for a BadgerCare recipient. In the cases where the respondents did not recall completing a form specific to BadgerCare, the interview focused on the employer's typical process for verifying earnings or health insurance. Some employers questioned how this process differed from the other Employer Verification of Insurance Coverage (EVIC) BadgerCare employer survey conducted to determine if BadgerCare clients are eligible for Wisconsin's Health Insurance Premium Purchase (HIPP) program.

Diffused Responsibility for Verification

We found a variety of parties involved in completing verification forms. Verification forms are often completed at corporate headquarters or by using the "Work Number" Internet site. Just 5 of the 17 employers told us that the forms were completed at their place of business. The 9 who reported the forms were completed at corporate locations were evenly divided among in-town locations, other towns in Wisconsin and out-of-state locations.

The same units in the company did not always complete verification of earnings and of health insurance. Staff that were responsible for payroll typically completed earnings verifications and sometimes this was outsourced or done at corporate headquarters. Verification of health insurance was often done by "benefits" staff, and this also might be outsourced. (When

responsibility for these functions was divided, the interviewer attempted to contact both parties involved.)

In some cases responsibility for verification depends upon which location of the company an employee works in. One employer we spoke with reported that if the person worked in Milwaukee (and consequently was on the company payroll for Milwaukee), the earnings verification was done at the Milwaukee location or the actual work site. Otherwise, if the person worked at another location in Wisconsin, when the request for verification came to the Milwaukee office, the person looked up the employee's work history on the company's computer files and then sent the form to the corporate headquarters in Illinois for verification.

We also found cases in which responsibility for completing verification varied within a company. Some company units completed the forms directly; others sent them to corporate headquarters. And some company units used the "Work Number" for verifications while others entered the information directly.

Amount of Time Needed

The employer surveys also suggest that it would be unusual for the EVF process to be completed in the time provided. In the cases where the forms were completed at corporate headquarters, just two of the employers reported that it took a week or less for the verification forms to be transmitted to the corporate headquarters. This time would be in addition to the time needed to complete the form. Most of the employers reported that it took a week or less for the form to be completed by them once it was received. Thus about two weeks needs to be allowed for the employer to process and complete the form. This leaves only six days to mail the form to the client, for the employer to mail the form back to the client, and for the client in turn to mail the form to the state EDS for scanning.

In fact, just one of the employers reported that they did mail the form back to the employee. Six said they mailed it back directly to the state, four said they handed it to the employee, two said they kept it in their office until the employee came to pick it up, one reported faxing the form, and two used the "Work Number" Internet service. This Internet service requires the employee to contact their IM case worker to access data on the web to complete the form. Most of the employers felt it would be easier if they could fax the form back when completed.

One employer noted that employee verification is not a process that typically has a deadline associated with it. Thus they tend to complete verification forms after other activities that typically do have deadlines are done.

Employers' Recommendations

Few criticisms of the EVF forms were reported. However, several of the employers did not realize that failing to complete the form in the time allowed would result in the employee being denied or losing BadgerCare benefits. Employers suggested that if this was the case, it should be

clearly noted on the form itself. Also as noted many of the employers we spoke with did not recall completing verification forms specific to the BadgerCare program. One employer suggested that the form needs to indicate what programs it is used for. Nothing on the form tells them it is for employees' eligibility for BadgerCare so they have no way of knowing it could affect their benefits. Employers noted that they do hundreds of verifications each year; some employers reported doing 40-50 per day.

Another suggested revision to the insurance form was to add the following questions:

- "A. Is health insurance available when annual enrollment begins?"
- B. Are you currently enrolled? If not, when can you next enroll?
- C. Effective dates _____
- D. Never."

Employers also recommended that the forms should be sent to them directly from the state and completed forms should be sent directly back to the state by the employer. One employer noted that it was their policy not to return the forms to the employee in order to prevent employees modifying the information after the employer completed the form. Hardships related to the need for employees to get to out-of-the way locations where the verifications were actually done were noted. One case was identified where employees without cars need to take a bus to corporate headquarters to drop off the forms, but the closest bus stop was eight to nine blocks away from the office.

One employer noted that requiring the forms to be mailed back delays the process because it takes time to address the envelope. They noted that because extra work is involved they may set this aside until they have time to complete it. Providing a self-addressed envelope, or permitting the form to be faxed back, would make it more likely that the verification would be mailed as soon as the information was recorded on the form. This employer also recommended that someone in the state should be responsible for following up if the forms are not received by the due date. The employer reported that recently they had to complete forms again which they had already mailed to the state. It is possible that these forms had to be completed again because the original forms were not received by the due date.

Employers --particularly staff responsible for payroll-- told us that sufficient time needed to be allowed for the process. We were told of cases in which employees brought the forms in and asked that they be completed that day. Employers noted this was not always possible when other functions with deadlines such as payroll had to be completed first because they were of a higher priority.

Employers also reported some concerns about reporting this information, feeling that it could violate federal confidentiality (HIPPA) regulations. This was noted as a concern with the insurance form, especially if the family was divorced. Six of the employers reported that they required their employees to sign a release allowing them to provide the information. Just one of the employers reported charging a fee (\$2.25) to provide verifications for employees.

Income Maintenance Workers' Views Concerning the EVF Process

Information on income maintenance workers' views concerning the EVF process was obtained from a statewide web-based survey of income maintenance workers and from on-site interviews of income maintenance workers in selected counties.

Statewide Survey of Income Maintenance Workers

A web-based survey was used to obtain input from income maintenance workers across the state.

Coordinators were asked to forward an email with a link to the survey to all IM workers in their agency that had at least one BadgerCare case in their caseload. The survey was voluntary, but workers were encouraged to respond.

The survey was distributed to income maintenance workers and supervisors with active BadgerCare caseloads. This included Family MA/BadgerCare cases, workers who process changes in a Change Center, and workers who process applications for Family MA/BadgerCare. The survey was distributed November 24, 2004. A total of 335 responses were received by December 6, 2004. Responses were received from approximately one third of the 987 income maintenance workers with BadgerCare cases in the state. Respondents were from 75 of the 92 county/tribal units with open BadgerCare cases. With the exception of Racine County that did not respond, survey respondents were generally representative of income maintenance workers with open BadgerCare cases in individual counties and tribal units. (A list of the respondents in each county/tribe and the number of income maintenance caseworkers with BadgerCare cases in each county/tribe is in the appendix to this report.)

Respondents' income maintenance caseloads ranged from 1 to over 800 cases, and BadgerCare clients accounted for 1% to 95% of these cases. Half of the respondents reported that BadgerCare cases represented 35% or less of their caseloads. None of the respondents reported that they only had BadgerCare cases.

Employer Contacts to Income Maintenance Workers

Respondents were asked how many times per week, on average, employers contacted them with questions about employer verification forms for BadgerCare cases. Most answered that they were contacted, but not frequently, typically less than once per week.

How many times per week, on average, are you contacted by employers with questions about the employer verification forms for BadgerCare cases?

Response	Number	Percent
I have never been contacted	77	24%
Less than once per week	158	48%
1-10 times per week	85	26%
11-19 times per week	5	2%
20 or more times per week	2	< 1%
Total	327	100%

Rating Importance of Reasons for Not Returning the EVF

Respondents were asked to rate 10 possible reasons why BadgerCare applicants or clients were not returning employer verification forms.

There may be a number of reasons why BadgerCare applicants or clients are not returning employer verification forms. Please indicate which of the following you have found to be reasons why the forms are not being returned. Rate the reasons in order of importance with “1” being the most important and “5” being the least important. Only rate those that you have found to be reasons why the forms are not returned.

To summarize this information, responses were tabulated and weighted to reflect the ratings. (For example, the rank of 1 [the most important] was weighted “5”, etc.) This score was then used to rank the 10 reasons based on their importance as reasons for why the EVF forms were not being returned.

Income maintenance workers clearly felt that employers were more responsible than clients for not completing the forms in time. Completing health insurance verification forms was seen as somewhat more difficult than getting the earnings verification forms completed. Income maintenance workers also felt that clients’ lack of understanding regarding the implications of getting the forms completed contributed to not getting the forms back. Few felt that clients were not getting the forms initially or lack of U.S. citizenship, access to other insurance or excess income were significant reasons why EVF forms were not returned.

Income Maintenance Worker Responses to Web-Based Survey

Reasons Why EVF Forms Are Not Returned	Rating of Importance					Total	Score (Rank)
	1 Most Important	2	3	4	5 Least Important		
Client had difficulty getting his/her employer to complete the employer verification forms by the due date	146	67	51	30	29	323	3.84 (1)
The client's employer did not complete the health insurance verification form.	97	67	58	42	36	300	3.49 (2)
The client's employer did not complete the employer verification of earnings form.	86	74	55	44	41	300	3.40 (3)
Client did not understand that his/her benefits would stop or the application would be denied if s/he did not return the employer verification forms.	86	51	59	49	46	291	3.28 (4)
The client did not want his/her employer to know that s/he applied for or was receiving BadgerCare	71	56	47	42	62	278	3.12 (5)
Client did not know that s/he had to return the employer verification forms.	36	45	65	59	74	279	2.67 (6)
Client had other health insurance coverage or access to other insurance.	38	40	57	57	75	267	2.66 (7)
Client had excess income.	35	30	38	55	100	258	2.39 (8)
Client did not receive the employer verification forms.	16	28	42	63	126	275	2.07 (9)
Persons living in the client's household and applying for aid were not citizens/nationals of the U.S or were not legal immigrants.	17	11	13	29	170	240	1.65 (10)

Note: Including 17 additional responses received after the December 6th cutoff date resulted in the questions ranked 6 and 7 changing place in the rankings.

Other Reasons Why EVF Forms Are Not Being Returned

Income maintenance workers were also asked to describe any other reasons why the forms were not being returned and to indicate suggestions for improving the EVF process. A number of reasons were cited and suggestions made. Income maintenance workers were asked, “*Are there any other reasons why employer verification forms are not being returned for BadgerCare cases?*” Over 200 narrative comments were received. Comments related to the time allowed for the process, the content/design of the EVF forms, problems related to the client’s and to the employer’s roles in the process, and system issues with the process itself. A sample comment that touched on a number of these areas was:

I think that in some cases employers are either too busy or they just don't care and therefore it isn't a top priority for them. In other cases the employer won't fill it out and it has to go to a corporate office, often in another state, and that takes more time, especially if the corporate office sits on it. A lot of the time the employee isn't aware of this or they don't understand how much extra time it is going to take so we are not notified in order to extend the due date. If the problem is in reference to the forms getting sent to Madison for scanning- I think the directions just

plain and simple are not being followed. Or, Madison gets the forms and they are not filled out correctly so everything gets exceptioned and it causes a lot more work for everyone.

Another sample comment that addressed problems with the time frame was:

10 day time frame not enough for forms to be sent to the client, the client to give to the employer, the employer completing them timely and returning them to the employee timely, plus then the employee has to send them to Madison instead of to the local agency. --- The worker then closes the case and the form gets to Madison, exceptions out and the worker has to enter them anyway.

Following is a summary of income maintenance worker's comments received as they were reported to us. No effort has been made to edit the comments. It should be noted that a number of the concerns and recommendations have already been addressed by changes made to the EVF process, and some of the comments may reflect misunderstanding of stated EVF policy.

Other Reasons Why EVF Forms are not Returned Identified by Income Maintenance Workers Surveyed

Time Allowed (68 comments)	
20	Mail Service not timely—forms delayed due to mail
26	Not enough time is allowed to complete forms
2	Forms not being recorded in a timely manner.
1	Process takes too long to open BC. Immediate medical needs of clients are not being met.
17	Local employers forward forms to central/corporate offices that may be out of town or the state. This increases time to complete the forms. Some employers fax forms to their corporate offices believing this will speed up the process, but this is not accepted format for state's CPU.
2	Too many extra procedural steps cause delays in processing forms.
The EVF Forms (51 comments)	
16	Forms confusing (don't understand denied vs. pending-verifying both start & termination of employment-language barrier)
1	No good instructions on form to assist employers in completing them
12	Forms not understood by client (Notices of decision-Give to employer)
20	Confusion by clients and employers on where to send completed forms. Many clients/employers send forms directly to county rather than to state.
2	"Income" question on form is misleading to employers.
Client's Role (59 comments)	
13	Clients ignore, disregard, don't read, don't open or toss mail.
9	Clients don't give forms to employer (timely).
3	Clients refuse to return forms (They seem to think that it is the ES worker's responsibility to return form(s), not theirs).
13	Clients failing to follow through. Procrastination on part of clients ("forgot", wait too long, irresponsible).
3	Clients don't realize that forms are to be mailed back to state by them.
1	Clients disregard notices. Wrong return address.
2	Client assumes that since they verified income for food stamps they don't need to verify income for BC.
2	Client assumes that since they already have BC, the forms don't pertain to them.
4	Clients don't want to reveal how much they earn or if they have access to health insurance because of cost to them or are on public assistance.
1	Clients (foreigners with small businesses) believe the state is investigating them.
1	Clients claim that forms were sent to state, but EDS never received them.
4	Clients not seeing the need to document prior employment.
1	Clients have to exert too much effort and time to get forms completed by employers (riding buses back and forth to employers to give and get form).
2	Client uses alias names while BC uses real names
Employer's Role (54 comments)	
17	Employers return forms incorrectly completed.
12	Employers refuse to complete forms for clients
10	Completing forms not a priority to employers.
4	Employer health insurance is too expensive for clients or they do not offer it.
8	Number of forms is overwhelming and inundating employers who have additional income verification forms to complete for other governmental agencies.
1	Employers charge employees fees to complete each form (Most clients don't have money to pay these fees).
2	Since there seems to be so many income verification forms that employers have to complete, they consider BC employees as "high maintenance" workers.

System Issues (26 comments)	
1	Forms sent to high school students whose income doesn't count anyway.
4	Majority of the forms are being "excepted" by EDS.*
4	Clients are being "excepted" because they don't have a standard number of hours of work per week and employers write on the form to explain the situation.
1	Employer directs client back to IM worker to verify income via either a 800 # or via the web ("The Work #")
1	Web sites like "The Work #" usually don't provide all of the necessary information to verify income.
1	Providing clients a choice of returning the completed form(s) or supplying pay stubs is confusing to clients.
5	Miscommunication between client & employer (client thought employer would send form to state).
12	Forms are getting lost (IM workers need to re-issue duplicates)

*Forms that are excepted lack information or have problems requiring Income maintenance worker attention.

Process Improvements Recommended

Income maintenance workers were also asked, *"A number of changes have been made to improve the employer verification process since it was first implemented. Based on your most recent experience with processing BadgerCare cases, what is the most important change that you would recommend to improve the employer verification process?"* Two hundred and forty IM workers offered narrative comments or suggestions in response to this question. Four individuals indicated either that the process and/or forms were working well for them and they did not know of any problems, or that the changes that have already been made seem to have improved the process and made things better.

Recommendations received were related to the content/design of the EVF forms, problems related to the client's role and the employer's role in the process, and system issues with the process itself. Following is a summary of income maintenance workers' recommendations and comments.

Income maintenance worker comments are shown as they were reported to us. No effort has been made to edit the comments. It should also be noted that a number of the concerns and recommendations of income maintenance workers have already been addressed by changes made to the EVF process, and some of the comments may reflect misunderstanding of stated EVF policy.

Process Improvements Recommended by Income Maintenance Workers Surveyed

Design and/or Content of the EVF Forms (general; which form not specified)	
13	The forms are confusing, hard to read or understand, or too complicated. Revise them to make them easier to read and understand; simplify the forms as much as possible.
8	Combine income and health insurance forms onto one page, or send them out together.
6	Employers write notes or comments on forms or add attachments, which causes exceptions. Add comment lines or allow employers to explain or clarify responses, in order to prevent this problem.
6	Too many forms are "excepted".
3	Include a return envelope with the forms.
4	Allow forms to be faxed in, to save time.
2	This process has resulted in many errors.
2	The cover letter is unclear or confusing, and should be revised.
Design and/or Content of the Income Verification Form	
36	Revise questions about frequency of pay and hours worked per pay period; just ask for hours worked per week rather than per pay period, since this is what many employers put anyway.
7	The form or process does not easily accommodate non-standard work schedules, such as part-time, seasonal, temporary, overtime, or situations where the client does not work the same number of hours each week.
4	The form or process does not easily accommodate non-hourly forms of compensation, including bonuses, commission, tips, holiday pay, etc.
3	Ask for amount of last paycheck
3	Ask for amount of first paycheck
3	Ask for actual income during the last 30 days
2	Revise/clarify the instructions
1	Have client sign for release of confidential information
1	Add language that if the client no longer works there, the employer still needs to report the last day worked, and date/amount of last paycheck
1	Make income verification more discreet
Design and/or Content of the Health Insurance Verification Form	
5	Clarify "state employee health insurance plan", employers don't understand it.
4	Need to do a better job of explaining 80% of premium rule, this is confusing.
3	The question about access to insurance is unclear.
2	Have a database of employers who don't offer insurance so it can just be checked off before forms go out.
1	The insurance form asks about family coverage but not single coverage; this confuses employers
1	Keep this form; many clients have access to insurance but don't take it.
1	Ask for the insurance provider's name.
1	Health insurance questions should coincide with questions on page 23
Clients	
7	Clarify/emphasize <u>to clients</u> what the consequences are, if forms are not returned; make it clear that their benefits will be discontinued if the forms aren't returned
5	Clarify/emphasize to clients that the form is supposed to go back to Madison; clients are confused about this.
2	Clients return the forms to their IM worker anyway, they prefer to do this or feel more comfortable doing this.
1	There should be an alternative to having the client take the form to the employer.
1	Have the client hand deliver the form to the employer
Employers	
46	Employers are not correctly completing "hours worked" or "how often paid"
7	Employers are not cooperating, don't like to fill out forms, don't consider it a priority, do not want to take the time.
7	Clarify/emphasize <u>to employers</u> what the consequences will be for clients if forms are not returned; make it clear that the client's benefits will be discontinued if the forms aren't returned.

2	Make timely employer completion of forms mandatory via state statutes
3	Employers are not filling out forms correctly, not following instructions
2	Provide clearer instructions to employers
2	Employers are totaling the earnings in the last column
1	Employer only uses Work # for insurance access, which is inaccurate and/or incomplete.
1	Some employers have to send the forms elsewhere (e.g. to out of state HQ) to be filled out; this makes it impossible to have them returned within 10 days.
1	Discrepancies in name of employer cause exceptions (i.e., locally-used name vs. corporate name)
EVF Process	
12	Have forms sent directly to employers, and have employers return them to Madison.
29	Allow the IM agency/workers to print out the forms themselves. Addresses two problems -- 1) they can send or give the forms directly to the client, and can make sure the client understands what needs to be done; and 2) clients sometimes lose forms, and need to get another one quickly.
60	Have completed forms taken or sent to IM agency/worker for processing, verification, and entry.
12	This process creates extra work for IM workers
25	Ten days is not enough time to complete this process, delays can occur at any point to keep the forms from being returned in time. Extend the timeframe.
3	There are problems related to scanning, including forms not being scanned in a timely fashion, employers answering with X's or check marks rather than filling in the circles, responses along one side not being read.
3	The process is too complicated and time-consuming, with too many steps and/or too many people or agencies involved.
7	Just use paycheck stubs to verify income.
3	Improve the timeliness of processing/entry of forms; the processing center in Madison is slow.
3	Do not send forms to Madison/EDS for scanning.
4	Certain cases should not get these forms (mentioned were family planning waiver clients, students, elderly and disabled cases).
2	Get the notices out to clients sooner. They go out too late for clients to get the information from employers and return the form in time.
1	Don't make verification mandatory until the second month of eligibility
1	Already-open Badger Care cases shouldn't be closed just because the forms haven't arrived yet.
3	It would be faster if the employer could provide information directly to EDS/Madison via phone, fax, email or a web site.
1	IM workers/agencies need faster verification of income to process child care authorizations
1	Workers need to know sooner which forms are exceptioned

Interviews of County Income Maintenance Workers

A series of on-site interviews were conducted in November to obtain county income maintenance workers' views on why EVF forms were not being returned and how the process could be improved. County staff were interviewed in Milwaukee, Racine, Sauk, and Dane counties. A copy of the interview guide is included in the appendix to this report.

The income maintenance workers that were interviewed told us that they felt that the electronic scanning and autopopulation process has significantly increased their workload. And, they felt that their workload had increased more than it would have if they were responsible for the

employer verification process. They felt they would be able to process the verifications more efficiently. They said that they needed to review all cases that are autopopulated because there are frequently errors, which only they can detect due to their familiarity with the case. Workers in one county estimated that this occurs 50% of the time when EVFs are autopopulated. They noted that there is a lot of job turnover among BadgerCare clients and that all jobs that terminate generate exceptions that require IM worker hand-on review and intervention to validate eligibility.

Income maintenance workers also objected to the new EVF process on the grounds that it duplicates verification for other income maintenance programs such as food stamps and child care. The Division of Health Care Financing notes that this illustrates misunderstanding of the BadgerCare EVF process. If earnings are verified as part of the FoodShare, Child Care, Medicaid, SSI Caretaker Supplement or W-2 program eligibility determination, the EVF-E is not generated by CARES. In addition, if individual earnings of a group member are already verified, BadgerCare does not require that they be re-verified. Finally, because no program other than BadgerCare, including Medicaid, requires verification that an individual does not have access or coverage by health insurance through his/her employer, there can be no duplication with other programs related to re-verification of health insurance access or coverage.

Income maintenance workers were also concerned about the new EVF process because they felt it had a negative impact on the ability of clients to obtain urgent medical benefits. Rather than being able to make the person in need of urgent medical care retroactively eligible as they did in the past, income maintenance workers reported that now they must wait for the employer verifications to be completed before the client can receive MA benefits. Income maintenance workers generally reported that they did not have time to counsel or serve as advocates for applicants or ongoing clients about the BadgerCare EVF procedures and requirements. Several instances in which clients could not reach their caseworker due to the volume of calls to caseworkers were cited.

Information obtained from the income maintenance workers interviewed indicates that counties are following different policies regarding closing cases for failing to return the verification forms. Some county income maintenance workers reported that they close cases promptly if the forms don't come in on time. Other county income maintenance workers reported delaying closing cases to allow more time for the EVFs to come in. Some workers told us that they circumvent the process if there is an urgent need for medical or child care that would be compromised if eligibility was delayed due to the EVF process. These suggests a possible need for more training to ensure that IM workers are aware of, and follow, stated policy for the EVF process.

Reasons Why EVF Forms Are Not Being Returned

Income maintenance workers also identified a number of factors that contributed to the EVF forms not being returned and a number of recommendations for improving the process. They noted problems with inflexibility of the EVF process, its complexity, and that the process made the client responsible for a process that he or she could not control.

Following are income maintenance workers' comments reported as they were told to us. No effort has been made to edit these comments. It should be noted that a number of the concerns and recommendations of income maintenance workers have already been addressed by changes made to the EVF process, and some of these comments may reflect a misunderstanding of the stated policy for the EVF process.¹²

Reasons Why EVF Forms are Not Returned Identified by Income Maintenance Workers Interviewed

Forms and Instructions
<ol style="list-style-type: none"> 1) The EVF Cover Letters do not adequately clarify or boldly emphasize that failure to submit the EVFs will result in a denial or loss of BadgerCare benefits. The "Request for Health Insurance Verification" cover letter states that, "If you do not return this form, your BadgerCare benefits will stop or your application for BadgerCare will be denied." However, this warning is buried in the middle of the letter and is of the same font as the rest of the letter. No such statement is even made in the "Request for Employment Verification" cover letter or in the combined "Request for Employment and Health Insurance Verification" cover letter, so these cover letters do not adequately communicate the consequences of non-compliance with EVF requirements. The EVF warning and instructions must be up-front, bolder and consistently communicated so that clients and employers understand the impact of non-compliance with EVF requirements. 2) The BadgerCare notices and cover letters regarding EVF requirements and eligibility determinations contain excessive legal jargon that many clients cannot comprehend. The most important message of the letter may be buried within the text (e.g., your employer must complete EVF forms or you will be ineligible for BadgerCare). 3) The EVF due date may be unclear. It's called a "Verification Due Date" in the cover letter, which is a vague term. 4) The Spanish translation of the EVF requirements may be incomprehensible and confusing. Even County IM staff who are fluent in both Spanish and English cannot understand EVF requirements based on the translated directions included in the Spanish cover memo. 5) The BadgerCare informational brochure is obsolete and contains inadequate information about EVF requirements. 6) The MA/BadgerCare Application booklet lacks reference to EVF requirements. This booklet was last updated in January 2003, prior to the implementation of BadgerCare Employer Verification. Therefore, the instructions are obsolete and incomplete and this contributes to confusion about EVF requirements. 7) If the client obtains the BadgerCare application on the Internet, they do not see the EVF instructions and may not realize that there is an EVF requirement. 8) The reporting format for earnings data is confusing to employers and error prone. Hours per week vs. hours per pay period may be erroneously reported. Workers need to manually correct to facilitate autopopulation.
The Client's Role
<ol style="list-style-type: none"> 1) Clients may not realize that they must verify their earnings and access to health insurance. They are inundated with notices and other official state paperwork. They often don't open their mail in a timely manner, if at all, or read or comprehend the directions and they may not realize the urgency of returning the completed EVF forms

¹² For example, some income maintenance workers reported that if both check stubs and the EVF forms are turned in, income may be double counted and, upon autopopulation, the client may erroneously be deemed BadgerCare ineligible. However the Division of Health Care Financing reports that if pay stubs have been turned in, CARES does not generate an EVF-E.

<p>as required.</p> <ol style="list-style-type: none"> 2) Clients may be confused about BadgerCare EVF requirements because the family may have different types of MA for different family members (e.g., young kids are on Healthy Start and older kids and parents are on BadgerCare). BadgerCare requires employer verification; however, other family MA programs do not. 3) Illiteracy or limited reading skills may prevent the client from understanding the need to complete the EVF and/or their need to take action to request their employer to complete the EVF. The forms and letters may be written at a reading level that is too high for client/employer comprehension. 4) When a client terminates their job, they may not realize that the EVFs need to be completed by the former employer and fail to submit the EVF-E. It seems illogical to verify employment for a job that they no longer have. 5) Clients may be confused about how family income is computed and inaccurately conclude they are ineligible for BadgerCare or that they would need to pay a premium that they cannot afford. Consequently, they may not follow through on submitting the EVFs to complete the BadgerCare application process. 6) People who are subject to a premium may need to pay 2 premiums in month #1 because of the lack of timely submission of the EVF. Consequently, clients may decide to not turn in the employer verification forms and drop out of BadgerCare because they cannot afford to pay the double premium at once. 7) People who have any insurance through their employer may not turn in the EVFs because they think they are automatically ineligible for BadgerCare.
<p>The Employer's Role</p> <ol style="list-style-type: none"> 1) Clients and employers may not realize that they must verify both earnings and access to health insurance and turn in 2 separate EVFs. Employers frequently verify earnings, but do not verify access to health insurance. 2) The language in the EVF regarding access to Wisconsin or other State health insurance is confusing to employers and may result in reporting errors. They also may not know if the employee may have access to State health insurance through their spouse. 3) The EVF-E may go out separately from the EVF-H and both employers and clients may be confused regarding reporting requirements. With a new job, the health insurance EVF follows the earnings EVF and employers may think that they already complied with all EVF reporting requirements and they discard the second EVF. 4) Some employers provide standard health insurance coverage, paying less than 80% of the premium or consistently do not provide health insurance and they could be exempted from EVF-E requirements.
<p>The Process: Logic/Processing Problems</p> <ol style="list-style-type: none"> 1) The Work # Website may not be accessible to all IM workers or may not contain enough pertinent information to process the form. For example, Milwaukee IM staff indicate that they lack a PIN and therefore, cannot access the site. This action, coupled with poor client accessibility, effectively denies the client the opportunity to obtain or maintain BadgerCare benefits. 2) There is confusion about who is responsible for turning in the EVFs. Clients may believe that the employer will submit the completed EVFs to the state. Some employers directly return the EVFs to the state, however, they are not required to do so and this is done out of gratis. 3) If the client cannot get the EVF-E completed by the employer by the due date or at all, they may not realize that they can turn in check stubs to verify earnings. Consequently, they may not complete the EVF-E process. 4) If the employer or anyone else writes anything on the EVF that is outside of the intended response areas, the EVF is kicked out as an exception and the caseworker must follow-up with the employer to re-verify all data. This delays completion of the

form. Further, caseworkers have high caseloads and this is another burden on their time so it might not get done in a timely manner which could delay eligibility. Employers also have other workload responsibilities and responding to follow-up questions is an additional burden on their time.

- 5) Part-time, seasonal and temporary jobs rarely offer health insurance but clients who work in these jobs are required to verify the lack of health insurance access anyway.
- 6) The logic behind EVF reporting assumes stable employment and wages per employer, but this employment pattern is rare with the BadgerCare caseload. Clients typically work several jobs, have variable work hours, work overtime or have differential pay rates for overtime and frequently switch jobs. The EVF system is unable to accommodate earnings data for people who have variable wages. This leads to EVF autopopulation failure and requires constant IM worker intervention to obtain employer verification and manually edit EVF data.
- 7) The formatting of the EVF forms for scanning purposes is inflexible and anytime there is a range of data (e.g., 20-30 hours of work/week) provided, an exception is generated.
- 8) EDS does not make any minor adjustments to submitted EVF data to enable EVF autopopulation and the software is not programmed to employ logic to make such adjustments. For example, on earnings verifications for other programs, if the employer gives a range of salary/hours, the worker would key in an average to facilitate the eligibility decision. In comparison, EDS presently does not make minor adjustments to accommodate these situations and consequently, an exception is always created.
- 9) EDS software cannot always accurately read the scanned data. For example, \$10.50/hour may translate as 50 cents/hour. This may prevent autopopulation or inaccurately store EVF data.
- 10) Sending EVFs to EDS is a dramatic change in IM processing protocol and is confusing to clients and employers. For years, all paperwork has gone directly to the County IM worker and both clients and employers misunderstand this procedural routing change. As a result, EVF data may be misdirected, lost or late, and consequently, BadgerCare is denied/terminated due to the failure to complete the EVF process on time.
- 11) Employer names are confusing. The employer's commonly understood generic name may be different from their legal name (e.g., McDonalds vs. Missoula MAC) and a duplicate employment record may be generated which overstates earnings, creates an exception and impacts eligibility for benefits. Further, if the wrong employer name is listed on the EVF, some employers refuse to complete the EVF.
- 12) If both check stubs and the EVF earnings forms are turned in, the income from that source may be double counted. Upon autopopulation, the client may erroneously be deemed BadgerCare ineligible.
- 13) Counties indicate that Faxed EVFs are not generally scanable at this time and their use creates an exception. If they were scanable or if Faxed data were manually entered by EDS, it would decrease exceptions and increase the likelihood of timely submission of EVF data.
- 14) CARES sometimes inaccurately computes due dates and does not allot enough time for EVF submission. IM Workers need to manually adjust EVF due dates to allow adequate time for EVF data submission.¹³
- 15) When cases are converted from the old to the new EFEI screen, unnecessary EVF forms are generated. The EVFs are not needed until annual review. This results in an extra unnecessary reporting burden.
- 16) IM workers cannot locally generate or print an EVF. This impacts their ability to issue a 10-day notice. It also impacts their ability to be responsive to the client's need for an EVF to expeditiously qualify for BadgerCare or to replace lost EVFs.

¹³ The Division of Health Care Financing notes that this statement is not supported by calls made to the CARES Call Center or problems reported and tracked in the CARES Application Tracking System (CATS).

Factors the Client Cannot Control

- 1) All EVF letters generated out of CARES go to the case head. If there is an employed person who is not the case head, the employed person may never get the letter and know that they are required to get the EVF completed.
- 2) Clients may not receive the EVF in the mail if they moved. Even if they forwarded their mail, it may not get to them prior to the EVF due date.
- 3) Some employers refuse to complete EVFs.
- 4) Some employers (e.g., temp agencies) will verify employment retrospectively, but refuse to provide data on future earnings because it's too variable to accurately predict.
- 5) Some employers refuse to provide data without a written release from the client.
- 6) It's difficult to get EVF data from former employers. It's awkward and inconvenient for the client to request this data from prior employers. Employers may think that they are not required to complete the EVF since they no longer employ the person and there is no income to verify. Further, their relationship with the former employer may be hostile. As a result, employers may refuse to cooperate with the EVF request.
- 7) Illegal aliens often use fake SSNs. Employers may not want to verify income in such cases because they may fear that this would make them legally liable for illegal employment practices.
- 8) Some employers pay on a cash basis only and refuse to verify income.
- 9) Some employers will provide EVF data on the phone but refuse to complete the EVFs.
- 10) Some employers feel that state reporting requirements are excessive and they are reluctant to comply with additional reporting requests. Since EVF reporting is voluntary, clients are at the mercy of the employer to meet EVF requirements.
- 11) Inadequate time is available for submission of the EVF. Many employers send the EVF to a remote central office/corporate headquarters and consequently, the forms cannot get submitted in a timely manner.
- 12) Some corporate offices contract out payroll functions to accounting firms and getting data from these contractees adds to the delay in processing EVFs.
- 13) Some employers charge a fee for completion of the EVFs. Clients can't afford these fees and this poses a disincentive to returning completed EVF forms as required.
- 14) Some employers may be using BadgerCare as an alternative to their providing health insurance for employees. They refer employees to BadgerCare or attempt to get them enrolled in BadgerCare. IM workers indicated that some employers deliberately lower their health insurance cost share below 80% so employees will qualify for BadgerCare. IM workers also indicated that some employers might not reveal the availability of health insurance so that their employees may qualify for BadgerCare.
- 15) Inadequate time is allowed to verify employer data for current recipients (e.g., job changes, MA status changes, and requests for new services) because until recently, only 10 days were allowed for EVF data submission.
- 16) Clients indicate that they sometimes get their EVF letter so late that there is only a day or so remaining before it is due.
- 17) The EVFs do not include an addressed return envelope. Therefore, employers and clients may not know where to send completed EVFs and completed forms may get lost or misdirected. Employers often send the EVFs to the wrong place (e.g., the HSD). For example, the Dane Co HSD has been keeping track of the number of EVFs that are sent to them and they estimate that about 40% of EVFs are sent to them. They batch these and periodically send them to EDS.

Process Improvements Recommended

The following is a listing of the process improvements recommended by income maintenance workers.

Process Improvements Recommended by Income Maintenance Workers Interviewed
<ol style="list-style-type: none">1. Revise EVF cover memos so that the first sentence is a straightforward, simple, bold statement that communicates to both the client and the employer that failure to complete the EVF process by the specific due date will result in BadgerCare ineligibility. Later in the text of letter, include all the other necessary legal text.2. Clarify and emphasize in the cover memo that <u>both</u> earnings and access to health insurance must be verified for the employed person.3. Clarify and emphasize that all employed persons in the assistance group must verify both earnings and health insurance.4. Use a two-page verification form that clearly expresses the consequences of non-submission of EVF data at the top of the form and that verifies both health insurance availability and earnings. Use page 1 for EVF-H and page 2 for EVF-E. Since EVF-E is not needed if the client provides pay stubs, only page 1 of the form would be sent out for those cases that already verified their income via pay stubs. Consider modeling the EVF after forms that have been successfully used by counties. For example, Dane Co has a straightforward EVF that allows collection of both types of verification on one form.5. Put a warning on the outside of the envelope that highlights the urgency of immediate attention so people do not toss the forms.6. Include a release form in the application/EVF package to obtain client authorization for the employer to provide the IM worker/EDS with EVF data. This would expedite the ability of the IM worker to collect and clarify EVF data when there is a need to do follow-up with the employer.7. EVFs should be sent directly to employers. Include a copy of the client's release form so they employers can provide EVF data.8. Employers should return EVFs directly to the County/EDS rather than via the client.9. Include a self-addressed, postage paid, business reply return envelope with the forms so it is clear where to send the completed EVFs.10. Extend the time period for completion of EVFs to 45 days for new applicants and to 30 days for recipients.11. Establish a website that employers could use to submit EVF data. This would help expedite data submission in those cases where the EVFs go to non-local corporate headquarters.12. Allow employers to provide EVF data via the phone.13. Establish a statewide BadgerCare hotline for clients and employers to call with questions regarding the BadgerCare EVF process.14. In requesting data on the number of work hours and pay, request that data be submitted that shows earnings/hours per week.15. Establish a PR campaign to publicize the importance of EVF. Develop brochures and involve advocacy groups to implement this.16. Exempt EVF-E if the job is with an employer who never provides health insurance to any employees or to part time/temporary employees.17. Don't require EVFs for jobs that the client is no longer working in.18. Provide a "dummy" sample form in the EVF packet so employers have a model to use to complete the forms.19. Modify software so that stray marks on the EVFs do not automatically generate exceptions. This data provides valuable case details that allow the IM worker to verify eligibility.20. Create a new BadgerCare brochure that clarifies that EVF is required to qualify for BadgerCare. The current brochure is obsolete – it was created in 1999 (prior the

passage of EVF requirements) and still has Tommy Thompson pictured as the current Wisconsin Governor.

21. Revise the BadgerCare application and website to include reference to the EVF requirement so that applicants understand that they will need to request EVF form their employer.
22. Clarify that check stubs are an acceptable method of verifying earnings. Many clients don't realize this.
23. Allow the BadgerCare premium to be paid in installments if the client is subject to paying a two-month premium upon initial eligibility.
24. Improve the Spanish version of the EVF cover letters. IM staff who are fluent in Spanish find these letters to be incomprehensible.
25. Return the EVFs to the IM worker and use the IM workers to perform a pre-audit of the EVFs. They can make appropriate changes to the EVF data (similar to what they would have done in the past), incorporate case data that they are already familiar with and do follow-up with clients and employers to collect and clarify additional data needed to verify eligibility. Following the pre-audit and editing of the EVF data, EVFs can be sent to EDS for scanning and autopopulation. Using this process would prevent many inappropriate exceptions and facilitate autopopulation. IM workers report that currently up to 95% of EVFs require their intervention and follow-up due the failure of the autopopulation process.
26. Allow the IM worker to be able to print and distribute the EVFs locally.

Survey of Persons Denied or Terminated from BadgerCare Due to the EVF Process

In order to find out why completed EVF forms are not being returned as required, a sample of persons denied application or terminated from BadgerCare solely due to the EVF process in September 2004 were surveyed by phone in December 2004. The persons surveyed were identified from the same CARES extract of persons with EVF failure reasons that was used to prepare the profile of persons denied or terminated from BadgerCare due to EVF requirements presented earlier in this report. The survey was conducted by APS Healthcare, Inc. Following is APS Healthcare's report summarizing the results of the survey.

Pilot Telephone Survey of Applicants Denied or Enrollees Not Renewed BadgerCare Because of Failure to Complete the Employer Verification Form

Submitted by APS Healthcare, Inc.

February 28, 2005

Executive Summary

An unexpected decrease in BadgerCare enrollment has been observed. This decrease roughly corresponds to the implementation of a new process to verify salary and lack of employer-provided insurance as required under new legislation. A pilot study of applicants denied BadgerCare or those rejected for renewal for failure to return the Employer Verification Form (EVF) was conducted to explore whether the EVF process may be contributing to the decline in BadgerCare enrollment.

Survey results indicate that the EVF is not serving merely to identify applicant/renewals that should not be in BadgerCare, but has created a barrier to continued eligibility. This supports concerns that the EVF process may be contributing to the decrease in BadgerCare enrollment. The survey indicated a number of areas that could be improved. Most notable was the initial explanation of the EVF process and mailing of the EVF itself. Study cautions include the small number of interviews and acknowledging that conclusions are based entirely on recipient recollections, which may not be accurate. Based on the survey, it is recommended that efforts to improve the EVF process should proceed even in the absence of a larger interview study to make more accurate measurements.

I. Background

An unexpected decrease in BadgerCare enrollment has been observed. Since this decrease occurred at about the same time as implementing new legislation requiring employer

verification of wages and insurance at the time of enrollment and at annual renewal, an interest in whether employer verification process was a contributing factor developed.

This report presents the results of pilot telephonic surveys of 15 applicants denied BadgerCare coverage because they did not return the Employee Verification Form (EVF) and 15 BadgerCare enrollees that were not renewed for the same reason. Given the urgency of this matter, it was decided a small study be conducted that might either give direction to a larger investigation or produce suggestions for improving the employer verification process. Essentially, the questions to be addressed, if not definitely answered, by this pilot project include: How is the EVF process working? Are there specific barriers within the process that could be eliminated? Would some of the people rejected for BadgerCare because of a failure to return the EVF nonetheless be eligible for BadgerCare?

II. Method

The EVF process was reviewed to gain an understanding of it. A telephonic survey tool that addressed the various steps in the EVF process was developed, reviewed and approved by State staff knowledgeable of the EVF process (see Attachment 1). An interviewer was recruited and trained about the EVF process and the survey tool.

The pool of potential participants for this voluntary phone survey included the employed members of BadgerCare applicant families who were denied BadgerCare coverage or whose coverage was not renewed in September 2004. Initially, phone calls were made from a list of 60 randomly selected applicants from each group (the coverage denied group and the coverage not renewed group). However, after finding many phone numbers disconnected and difficulty reaching the employed person, the list of potential participants was extended to include all applicants denied coverage or whose coverage was not renewed in September 2004. Phone calls were continued until a total of 15 participants from each group were interviewed. Several individuals on the list were called multiple times in an attempt to find someone home, thus the number of attempted phone calls exceeds the number of names used from the contact list. The results of phone call attempts are noted in the Table 1 below.

Table 1: Result of phone calls by participant group

	BadgerCare Not Renewed	BadgerCare Denied	Total
Number of total phone call attempts	132	107	239
Number of names from list attempted to contact	71	64	135
Disconnected phone numbers	24	15	39
No answer	31	34	65
Completed surveys	15	15	30
Did not consent to survey	1	0	1

Phone calls were made during the workday as well as in the evenings and on weekends. Although the individuals being interviewed are employed, many hold jobs at restaurants, retail stores, or work second or third shift, so a variety of calling times was necessary to reach

participants. In several instances, the BadgerCare casehead answered the phone and wanted to answer the survey questions in the absence of the employed person. Most of the caseheads understood that the survey needed to be completed by the employed person. However, a few mentioned that they take care of all insurance issues and they could have answered questions more accurately than their spouse/fiancé/etc.

As shown above, 39 of the 135 phone numbers attempted were disconnected or no longer in service. Attempts were made to find new phone numbers for individuals by using directory assistance, but only 1 of the 39 individuals had a new phone number listed. The higher number of disconnected numbers among the non-renewal group might be explained by more of them relocating since their last application versus the denied group who recently applied and whose contact information should still be current.

Thirty-one employed participants were contacted on the phone and thirty of them consented to the survey. One individual refused to participate in the survey. She stated that she was “disgusted with everything to do with BadgerCare and didn’t want to talk to anyone about it.”

III. Results

Characteristics of survey participants are detailed in Table 2 below. Survey participants were generally young (under age 30), female, Caucasian, and had applied for BadgerCare for themselves, meaning they are also the casehead. Most participants were denied BadgerCare coverage because they failed to verify health insurance (failure code 551). Participants from twelve counties are represented in this study, however over one-third of the survey participants applied for BadgerCare in Milwaukee County.

Table 2: Description of Survey Participants

Characteristic	Number of Participants Whose Coverage Was Non-Renewed	Number of Participants Who Were Denied Coverage	Total Number of Participants in Both Groups
<i>Age</i>			
20-24	3	5	8
25-29	9	3	12
30-34	0	1	1
35-39	2	3	5
40-44	1	1	2
45-49	0	1	1
50+	0	1	1
<i>Gender</i>			
Male	2	5	7
Female	13	10	23
<i>Race/Ethnicity</i>			
African American	3	5	8
Caucasian	11	9	20
Latin American	0	1	1
Not Given	1	0	1
<i>Relation to Casehead</i>			
Self	14	10	24
Husband	1	2	3
Wife		1	1
“Not”		1	1
Friend		1	1
<i>County</i>			
Brown	2		2
Dane	3		3
Dodge	1		1
Eau Claire	1		1
Lincoln	1	1	2
Marathon	1		1
Milwaukee	4	7	11
Oneida		2	2
Polk	1		1
Racine	1	1	2
Rock		2	2
Sheboygan		2	2
<i>Case Closure Reason Code*</i>			
550	0	0	0
551	10	14	24
552	2	0	2
553	3	1	4

* Case Closure Reason Codes: 550 – Did not verify earnings for BadgerCare, 551 – Did not verify health insurance information for BadgerCare, 552 – Employer did not sign the earnings verification form, 553 – Employer did not sign the health insurance verification form.

Survey Results Highlights

- One-third of participants first learned they were not covered by BadgerCare through the phone interview. Many of these participants were upset/surprised that they didn't have health insurance and were frustrated that they were being told through a random phone survey, but were thankful that they didn't find out by visiting their doctor's office.
- Of those participants who knew they had been denied coverage and thought they knew why they were denied, 43% stated a reason that did not correspond with the reason for denial on record. In other words, only 57% of the participants understood why they were denied coverage, pointing to a high level of confusion among participants and applicants in general.
- While only 3 participants knew they could give their county case worker a pay stub to verify their income, all 3 of those participants took advantage of this option and produced a pay stub at their meeting.
- Only 57% of participants recalled receiving the EVF paperwork in the mail. Of the 17 participants who did receive the forms in the mail, 13 reported successfully forwarded the forms to their employer and 12 received completed forms back from their employer.
- Of those participants who mailed the completed forms, 70% identified the correct address (Madison). Another 20% reported mailing the forms to their county case worker.
- Of the 7 participants who already reapplied for BadgerCare, all reported their second application was approved.
- Most participant suggestions on how to improve BadgerCare included comments on 1) improving county case worker customer service skills and 2) making certain that applicants know to look for the EVF forms in the mail through better explanation and instructions from the case worker.

Results by Question

1. **According to our records, you were notified in September or October that you do not qualify for BadgerCare/told you no longer qualify for BadgerCare. Is this correct?**

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	8 (53%)	11 (73%)	19 (63%)
No	7 (47%)	4 (27%)	11 (37%)

Of those who answered "no," 10 learned they weren't covered through the phone interview and 1 woman learned her coverage was not renewed when she visited her doctor and her insurance card wasn't accepted. Thus, 33% of participants learned they were not covered by BadgerCare through the phone interview.

2. (Of those who answered “yes” in #1) Do you know why you did not qualify for BadgerCare/you were terminated from BadgerCare?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	7 (88%)	7 (64%)	14 (74%)
No	1 (12%)	4 (36%)	5 (26%)

Of those who answered “yes,” did the participant’s reason match the reason on record from BadgerCare?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Correct/Match	4 (57%)	4 (57%)	8 (57%)
Incorrect/Did Not Match	3 (43%)	3 (43%)	6 (43%)

Examples of incorrect reasons given by participants:

- “I missed too many review meetings with the case worker and the case worker denied my benefits.”
- “Case worker said I make too much money,” but the only denial code noted was 551 (failure to verify insurance)
- “My job offered insurance so I never sent in the forms to apply for BadgerCare,” but the denial code noted was 553 (employer did not sign insurance form)

3. Did you know that in order to receive BadgerCare benefits, your employer must verify your earnings and health insurance?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	11 (73%)	9 (60%)	20 (67%)
No	4 (27%)	6 (40%)	10 (33%)

4. Did you understand that if your employer did not verify these things you would be denied/terminated from BadgerCare?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	11 (73%)	9 (60%)	20 (67%)
No	4 (27%)	6 (40%)	10 (33%)

5. Did you get the Employer Verification Forms in the mail?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	9 (60%)	8 (53%)	17 (57%)
No	6 (40%)	7 (47%)	13 (43%)

*Those who answered “no” and did not receive the forms continued at Question #26.
Those who answered “yes” and did receive the forms continued at Question #6.*

6. Did you know there was a deadline to return the forms?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	8 (89%)	8 (100%)	16 (94%)
No	1 (11%)	0	1 (6%)

7. Did you try to get help from your County case worker to fill out the forms?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	1 (11%)	2 (25%)	3 (18%)
No	8 (89%)	6 (75%)	14 (82%)

Those who did not seek out help from the County case worker continued at #11.

8. Were you able to reach your County case worker for help?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	1	0	1
No	0	2	2

Those who did not reach their case worker continued at #11

9. Did you get the help from your County case worker that you needed?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	0	0	0
No	1	0	1

10. What help didn't you get? (for "no" answers in #9)

- The case worker said she would send the forms in to Madison, but the forms were never mailed or there was some paperwork mistake either at the case worker's office or in Madison.
- 5 additional participants commented that they had a high level of frustration with their case workers, citing that the case workers were non-responsive, made mistakes in calculating their income for other public assistance programs, lost paperwork, and seemed too busy to answer their questions.

11. Did you know that you could have given your County case worker a pay stub instead of having your employer verify your earnings?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	1 (11%)	2 (25%)	3 (18%)
No	8 (89%)	6 (75%)	14 (82%)

Those who answered "no" continued at #14.

Those who answered "yes" continued at #12.

12. Did you provide your County case worker with your pay stub?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	1	2	3
No	0	0	0

Those who answered "yes" continued at #14.

Those who answered "no" continued at #13.

13. Why didn't you give your county worker your pay stub?

This was not asked of anyone, as no one answered "no" to Question 12.

14. Did you take the verification forms you got in the mail to your employer?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	7 (78%)	6 (75%)	13 (76%)
No	2 (22%)	2 (25%)	4 (24%)

15. and 16. Why didn't you take the forms to your employer?

Of the 4 participants who did not take the forms to their employer:

- 1 didn't know the forms were important and forgot about them.

- 3 had insurance through their job or a new job and chose not to continue the application process.

17. Did your employer return the forms to you?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	6 (86%)	6 (100%)	12 (92%)
No	1 (12%)	0	1 (8%)

18. (For those who did not get the forms returned):

Did you do anything to get the forms back from your employer?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	0	0	0
No	1	0	1

19. What did you do to get the form from your employer?

This was not asked of anyone because no one answered yes” to Question 18.

20. Why do you think your employer didn’t give the form back to you?

- Participant was told that the employer was going to mail in the paperwork.

21. (Of those who did receive the form back from their employer): Did you mail the form back in?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	5 (83%)	5 (83%)	10 (83%)
No	1 (17%)	1 (17%)	2 (17%)

(For those who did mail back the forms.)

22. and 23. Where did you mail the forms?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Madison	3 (60%)	4 (80%)	7 (70%)
Case Worker	1 (20%)	1 (20%)	2 (20%)
Don’t Remember	1 (20%)	0	1 (10%)

(For those who did not mail back the forms.)

24. and 25. Why didn’t you return the forms?

- 1 participant mailed to the wrong address and re-sent the forms when they were returned.
- 1 participant obtained health insurance through their job, so they knew they wouldn't qualify and didn't bother continuing with the application process.

26. Have you re-applied to BadgerCare since September/October?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	4 (27%)	3 (20%)	7 (23%)
No	11 (73%)	12 (80%)	23 (77%)

(For those who re-applied)

27. Have you heard back about your application?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	4 (100%)	3 (100%)	7 (100%)
No	0	0	0

28. Were you allowed to join BadgerCare?

	<u>Non-Renewed</u>	<u>Denied</u>	<u>Total</u>
Yes	4 (100%)	3 (100%)	7 (100%)
No	0	0	0

29. Do you have any other comments or suggestions to improve the BadgerCare program?

Comments from Participants Denied BadgerCare Coverage

- Children's income shouldn't count toward the total family income. Teenagers need their money for college and it shouldn't be assumed that they contribute toward the family expenses.
- (2) When coverage is denied, also tell people if they can reapply and how they should reapply.

- (3) Hire new case workers. Participants acknowledged that case workers have very large caseloads and a difficult job, but felt that the level of unresponsiveness and lack of help was unacceptable.
 - One participant was completely disgusted with her case worker and said that it literally takes 5 to 8 calls to get a return call. She has been taken on and off BadgerCare multiple times in the last 6 months, but her income has never changed. She figured out that her case worker was calculating her income incorrectly by adding in unemployment (which she wasn't receiving). She is very fed up – she does everything she is supposed to, “jumps through many fiery hoops,” keeps all of her paperwork, and she still gets the run around.
 - Another participant has documented the mistakes the case worker has made over time and is trying to get assigned to a new case worker who is more responsive.
- (4) County case worker should have told participants they needed to look for the forms in the mail and that their employer would need to complete the information. Case workers should give clear instructions about all of the steps in the process and how/why the forms need to be completed. If participants would have known about the forms, they could have completed them ASAP.
- BadgerCare should have a clear method for telling people they don't have healthcare coverage, rather than being alerted through a phone survey (from one angry participant who didn't remember receiving the mailed notification).
- Reduce the cost of premiums.

Comments from Participants Whose BadgerCare Coverage Was Not Renewed

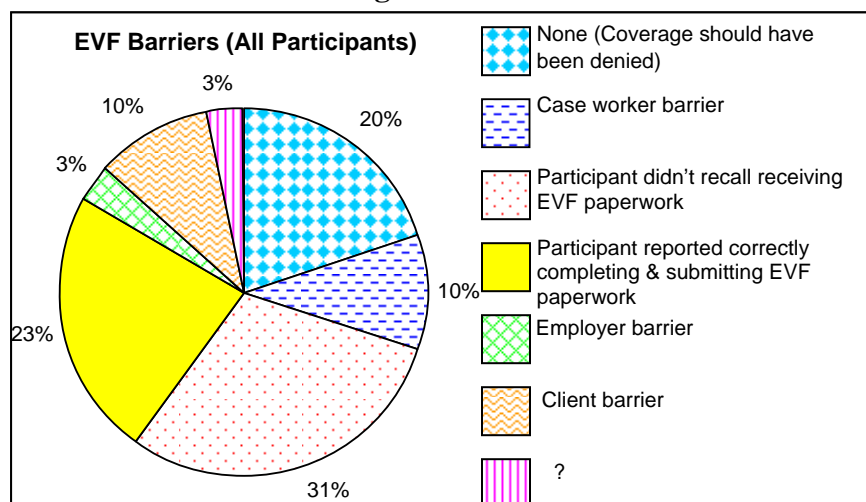
- BadgerCare should have a better method of notifying people that they no longer have health insurance. It was very embarrassing and upsetting to go to a doctor appointment and be denied service because my insurance card didn't work.
- When coverage is non-renewed, the letter should clearly state whether the whole family no longer has coverage or if the kids are still covered.
- (4) County case worker should have told participants they needed to look for the forms in the mail and that their employer would need to complete the information. If participants would have known about the forms, they could have completed them ASAP.
 - Case workers should give clear instructions about all of the steps in the process and how/why the forms need to be completed.
 - Participants didn't know about the paperwork because they hadn't completed it in the past.
- Make the paperwork less confusing. One participant felt frustrated after completing the paperwork the best she could and mailing it in to Madison, only to be denied coverage and being told to reapply.

- When coverage is denied, also tell people if they can reapply and how they should reapply.
- BadgerCare should charge lower premiums. One participant was frustrated that this year they have to pay a premium, when in the past they didn't and their income hasn't changed.
- (3) Hire new case workers or re-train case workers.
 - Case worker made multiple mistakes on the BadgerCare paperwork and the paperwork for food stamps and it is frustrating to double-check everything for errors.
 - Fed up with case worker's attitude and failure to return phone calls.
 - Frustrated that the case worker didn't take care of the paperwork like she said she was going to and that there was confusion about the forms. The recipient jumped through all of the right hoops and completed every form, so it was frustrating to have to get a second set of forms completed.

Summary of Possible EVF Barriers

Each survey participant was categorized based on what stage of the application process the EVF (Employment Verification Form) barrier occurred. Several themes were identified during the course of the interviews and are detailed below:

Figure 1



1. No Barriers (20%) - There were cases in which no barriers occurred and BadgerCare coverage was correctly denied. These cases include participants who chose to stop the

BadgerCare application process, those who did earn too much money to qualify, those whose employers did offer insurance, and those who moved out of Wisconsin.

2. Case worker Barrier (10%) – According to some recipients, some case workers made mistakes regarding the EVF process. These mistakes included telling applicants to forward the completed forms to the case worker who then failed to send the forms to Madison, and a case worker telling an applicant the EVF would be sent directly to the employer and the participant didn't need to complete any further paperwork.
3. Participant Didn't Recall Receiving EVF (31%) - Several participants reported never receiving the EVF paperwork in the mail. These participants commented that they did not know to look for the paperwork, but if they had received the forms, they would have been completed and submitted ASAP.
4. Participants Reported Correctly Completing and Submitting EVFs (23%) - Another group of participants believed they correctly completed and submitted the EVF paperwork and were confused as to why they were denied BadgerCare coverage. These participants reported mailing their signed forms to the correct address in Madison and seemed to have taken all the necessary steps in order to gain coverage. Several participants wondered if there were errors in processing the forms in Madison or if their case worker was initially wrong in telling them they should qualify for BadgerCare.
5. Employer Barrier (3%) - In one case, the EVF barrier occurred when the employer assured the participant that the employer would submit the completed form, but then failed to mail in the paperwork.
6. Client Barrier (10%) - Other participants fall into the category of client barriers. These include not knowing the EVF paperwork was important and forgetting about it, sending the paperwork to the wrong address, and forgetting that their spouse had applied for BadgerCare and subsequently losing the forms.
7. "?" (3%) - One final participant did not fall into any group as she claims to have never applied for BadgerCare and that she already receives health insurance through her job. A more detailed summary of EVF barriers by participant group is provided in Table 3 below.

Table 3: EVF Barriers by Participant Group

Type of EVF Barrier	Number of Participants whose BadgerCare Coverage was Not Renewed	Number of Participants whose BadgerCare Coverage was Denied	Total Number of Participants
No barriers	4	2	6
Case worker barrier	1	2	3
No recollection of receiving EVF paperwork	5	4	9
Participant reported correctly completing and submitting EVF	3	4	7
Employer barrier	1	0	1
Client barrier	1	2	3
?	0	1	1

Additional Comments and Observations

- Many people interviewed were thankful to have the opportunity to talk about BadgerCare and to get some questions answered. It seems that many have been shuffled through the system and feel like they jumped through many hoops, but rarely feel that their concerns are heard. The people who were called a second time to answers questions were shocked that they were called again. Many participants think their case workers have been non-responsive and are generally frustrated with the entire process.
- Only two of the participants were nonchalant or didn't seem to care about their BadgerCare coverage. Everyone else was attempting to understand the process, was concerned that they and/or their children were denied coverage, and was interesting in learning about how to reapply.
- There were MANY questions about BadgerCare during the interviews. Several participants actually consented to the survey by saying, "I'll answer your questions if you answer mine." Some wanted to know what the federal poverty limit is or why they are paying premiums. Others wanted to know what an HMO is or why their dentist won't accept BadgerCare. Most of the questions could be answered with information from the internet and personal references. It would be very difficult to get answers if a person didn't have internet access.
- The listing of BadgerCare contacts in each county on the internet is incomplete and it would probably be helpful for applicants to have a comprehensive listing of agencies in one place. On the DHFS website, clicking on "BadgerCare", then "Recipients", and then "Applying for BadgerCare", produced a listing of places people can contact to apply for

coverage. This website is:

<http://dhfs.wisconsin.gov/medicaid1/contacts/medcontact2b.htm> , but it only lists roughly 30 counties' contact information. This list was supplemented with information from the following website (<http://dhfs.wisconsin.gov/em/imagencies/index.htm>). Clicking on each county gives a good listing of where to apply for benefits. If the information on these two locations were combined into an easy-to-use list, it could be a great resource for people looking to apply for BadgerCare or other public benefits programs.

IV. Discussion

Two factors must be considered when discussing these results. First, this is a pilot study, and as such, results are based on relatively few interviews. This small number means the margin of error is large. Results may not be indicative of the BadgerCare EVF process. This is particularly true of later questions in the survey as the survey skip pattern prevented many from answering later questions. For example, if an interviewee reported that the EVF was never received, it makes no sense to ask if it was given to the employer to fill out. Second, interviewee answers are based on their perspectives and recollections. They may not be consistent with other data sources and this survey cannot resolve the discrepancies. For example, 23% of the respondents recalled completing the EVF correctly, including mailing it to the correct address. Yet if this were true, the denial code would not have indicated some incompleteness with the EVF. This survey cannot resolve why these people reported that they completed the EVF process correctly but the State database says otherwise.

It is possible that the new EVF process implemented in the spring of 2004 only served to deny coverage to applicants/renewals that were not really eligible (make too much or have employer-provided insurance). Although this is only a pilot study, it is clear that this hypothesis is not strongly supported. Only 20% of interviewees acknowledged that they stopped the EVF process because they knew they did not qualify. Failure to support this effect of the new EVF process gives merit to the alternative that the EVF process may have the unintentional consequence of preventing otherwise eligible citizens from enrolling in BadgerCare. Although the number is very small, note that of those 7 that re-applied to BadgerCare, all were allowed to join.

This survey did not reveal a single barrier. Rather, barriers can apparently occur throughout the process – between the State and the applicant at the beginning, between the applicant and the employer, and between the applicant and the State at the end. However, of particular interest was that 31% of the interviewees stated that they never received the EVF. This is of concern not only because of the large number of interviewees who reports this, but because this is the first step in the process. Subsequent steps cannot be completed if the initial step is not successful.

Even though this is only a pilot study, it did suggest ways to improve the EVF process or at least areas to address. These include:

1. Improve the process by which the EVF is sent to the applicant. Duplicative efforts might be required. This could include having the county case worker also provide the EVF and multiple mailings of the EVF and/or reminders. The content and design of the EVF could also be reviewed to ensure that it catches the applicant's attention and

- is clear in its instructions and the consequences for not completing the form. Another related change is to mail the EVF to the employed person rather than the casehead.
2. Additional training to county case workers.
 3. Multiple efforts to notify applicants who are rejected, clear explanation of why coverage was denied, and encouragement to re-apply.
 4. Efforts to increase the use of a pay stub to verify earnings. Few interviewees recalled this option. All those that know about it used it.

V. Recommendations

It might be advisable to conduct a far greater number of interviews to produce more valid measurements. However, this pilot study, even though limited by its size, seems to indicate that the EVF process as it currently exists may be a barrier to eligible residents. Further, this pilot study found possible barriers in multiple steps of the process rather than a single barrier. Thus, it is recommended that a work group begin to identify, operationalize, and implement improvement in the EVF process now, rather than wait for more definitive measurements.

Appendices

Appendix A- Income Maintenance Worker Web Survey Respondents

Workers with Open Badger Care Cases

Survey Respondents

County / Tribe	Number	Percent	Number	Percent
01: ADAMS COUNTY	4	0.41%	2	0.60%
02: ASHLAND COUNTY	7	0.71%	3	0.90%
03: BARRON COUNTY	11	1.11%	2	0.60%
04: BAYFIELD COUNTY	6	0.61%	0	0.00%
05: BROWN COUNTY	29	2.94%	16	4.78%
06: BUFFALO COUNTY	4	0.41%	2	0.60%
07: BURNETT COUNTY	4	0.41%	1	0.30%
08: CALUMET COUNTY	5	0.51%	0	0.00%
09: CHIPPEWA COUNTY	12	1.22%	4	1.19%
10: CLARK COUNTY	6	0.61%	5	1.49%
11: COLUMBIA COUNTY	9	0.91%	4	1.19%
12: CRAWFORD COUNTY	3	0.30%	1	0.30%
13: DANE COUNTY	53	5.37%	29	8.66%
14: DODGE COUNTY	10	1.01%	6	1.79%
15: DOOR COUNTY	5	0.51%	1	0.30%
16: DOUGLAS COUNTY	13	1.32%	8	2.39%
17: DUNN COUNTY	9	0.91%	7	2.09%
18: EAU CLAIRE COUNTY	16	1.62%	5	1.49%
19: FLORENCE COUNTY	3	0.30%	1	0.30%
20: FOND DU LAC COUNTY	24	2.43%	3	0.90%
21: FOREST COUNTY	5	0.51%	0	0.00%
22: GRANT COUNTY	8	0.81%	0	0.00%
23: GREEN COUNTY	8	0.81%	3	0.90%
24: GREEN LAKE COUNTY	5	0.51%	2	0.60%
25: IOWA COUNTY	5	0.51%	3	0.90%
26: IRON COUNTY	3	0.30%	2	0.60%
27: JACKSON COUNTY	5	0.51%	2	0.60%
28: JEFFERSON COUNTY	14	1.42%	8	2.39%
29: JUNEAU COUNTY	5	0.51%	4	1.19%
30: KENOSHA COUNTY	32	3.24%	8	2.39%
31: KEWAUNEE COUNTY	3	0.30%	1	0.30%
32: LA CROSSE COUNTY	18	1.82%	13	3.88%
33: LAFAYETTE COUNTY	4	0.41%	3	0.90%
34: LANGLADE COUNTY	6	0.61%	2	0.60%
35: LINCOLN COUNTY	6	0.61%	2	0.60%
36: MANITOWOC COUNTY	9	0.91%	6	1.79%
37: MARATHON COUNTY	18	1.82%	7	2.09%
38: MARINETTE COUNTY	10	1.01%	6	1.79%
39: MARQUETTE COUNTY	4	0.41%	2	0.60%
40: MILWAUKEE COUNTY	224	22.70%	36	10.75%

41: MONROE COUNTY	6	0.61%	6	1.79%
42: OCONTO COUNTY	6	0.61%	0	0.00%
43: ONEIDA COUNTY	6	0.61%	3	0.90%
44: OUTAGAMIE COUNTY	22	2.23%	8	2.39%
45: OZAUKEE COUNTY	7	0.71%	2	0.60%
46: PEPIN COUNTY	3	0.30%	1	0.30%
47: PIERCE COUNTY	5	0.51%	4	1.19%
48: POLK COUNTY	9	0.91%	5	1.49%
49: PORTAGE COUNTY	10	1.01%	4	1.19%
50: PRICE COUNTY	4	0.41%	3	0.90%
51: RACINE COUNTY	33	3.34%	0	0.00%
52: RICHLAND COUNTY	7	0.71%	2	0.60%
53: ROCK COUNTY	35	3.55%	11	3.28%
54: RUSK COUNTY	5	0.51%	2	0.60%
55: ST. CROIX COUNTY	6	0.61%	4	1.19%
56: SAUK COUNTY	9	0.91%	4	1.19%
57: SAWYER COUNTY	6	0.61%	0	0.00%
58: SHAWANO COUNTY	9	0.91%	4	1.19%
59: SHEBOYGAN COUNTY	18	1.82%	9	2.69%
60: TAYLOR COUNTY	5	0.51%	0	0.00%
61: TREMPLEAU COUNTY	7	0.71%	7	2.09%
62: VERNON COUNTY	5	0.51%	5	1.49%
63: VILAS COUNTY	5	0.51%	0	0.00%
64: WALWORTH COUNTY	14	1.42%	5	1.49%
65: WASHBURN COUNTY	5	0.51%	5	1.49%
66: WASHINGTON COUNTY	15	1.52%	0	0.00%
67: WAUKESHA COUNTY	19	1.93%	8	2.39%
68: WAUPACA COUNTY	9	0.91%	5	1.49%
69: WAUSHARA COUNTY	6	0.61%	3	0.90%
70: WINNEBAGO COUNTY	24	2.43%	4	1.19%
71: WOOD COUNTY	22	2.23%	9	2.69%
72: MENOMINEE COUNTY	2	0.20%		0.00%
85: RED CLIFF TRIBE	2	0.20%		0.00%
86: STOCKBRIDGE-MUNSEE TRIBE	1	0.10%	1	0.30%
87: POTAWATOMI TRIBE	1	0.10%		0.00%
88: LAC DU FLAMBEAU TRIBE	3	0.30%		0.00%
89: BAD RIVER TRIBE	3	0.30%		0.00%
91: SOKAOGON TRIBE	2	0.20%		0.00%
92: ONEIDA TRIBAL COUNCIL	16	0.61%		0.00%
Total	987	100.00%		0.00%
Unknown			1	0.30%
			335	100.00%

Source: ACD Warehouse as of 12/04/2004

Appendix B - Income Maintenance Worker Web Survey Questionnaire

County_____

Worker_____

As of May 2004, BadgerCare applicants and current clients are required by state law to have their employer fill out forms verifying their income and their lack of health insurance through their employer. Many people are being terminated from BadgerCare or are being denied eligibility due to the failure to complete the employer verification process.

1. There may be a number of reasons why clients are not returning employer verification forms. Please indicate which of the following are reasons why these verification forms are not being returned to the County:

- A. Client did not receive the employer verification forms.
- B. Client did not know that they had to return the employer verification forms.
- C. Client did not understand that by not returning the employer verification forms their benefits would stop or their application would be denied.
- D. Client had excess income.
- E. Client had other health insurance coverage or access to other insurance.
- F. Client had difficulty getting their employer to complete the employer verification forms within the 30-day return requirement.
- G. The client's employer did not complete the employer verification forms.
- H. The client's employer did not sign the employer verification forms.
- I. The client's employer did not complete the health insurance verification form.
- J. The client's employer did not sign the health insurance verification form.
- K. Persons living in the client's household and applying for aid were not citizens of the U.S.
- L. Persons living in the client's household and applying for aid were not nationals of the U.S.
- M. Persons living in the client's household and applying for aid were not legal immigrants.
- N. The client was concerned that authorities might learn that they were behind on their child support payments.
- O. Other/Specify:_____

2. What problems exist with the employer verification process?

3. What changes should be made to improve the employer verification process?

4. When the computer generates an exception due to a problem with the employer verification forms or data (such as inconsistent data or stray marks), how long does it take you to re-verify all the EVF data?

- A. Estimated time you need to spend on re-verification
of hours _____
- B. Elapsed time due to delays in reaching the employer, your
workload, etc.
of days _____

5. Are there any policy, procedural or computer logic changes that you would recommend to reduce the number of computer generated exceptions?

6. Do clients contact you with questions about the employer verification forms or process?

- A. Yes
B. No
C. Unsure

7. Do you help clients to complete the employer verification forms?

- A. Yes, I help both current BadgerCare clients and BadgerCare applicants
B. Yes, I help current BadgerCare clients only
C. Yes, I help BadgerCare applicants only
D. No
E. Unsure

8. What kind of help do clients need or questions do they have regarding the employer verification process?

Specify:

9. Do you think that clients have difficulty reaching their caseworker for assistance in completing the verification forms?
- A. Yes
 - B. No
 - C. Unsure
10. Do employers contact you with questions about the employer verification forms?
- A. Yes
 - B. No
11. What kind of help do employers need or questions do they have regarding the employer verification process?
12. Have you received training on the employer verification process?
- A. Yes
 - B. No
 - C. Unsure
13. For BadgerCare re-determinations, do you follow-up with the clients to be sure that they:
- A. Received the employer verification forms.
 - B. Are aware that they will lose BadgerCare eligibility if the employer verification forms are not completed and signed by the employer and submitted on time?
14. For new BadgerCare applicants, do you think more employer verification forms would be returned if the county mailed the EVFs directly to the client's employer?
- A. Yes
 - B. No
 - C. Unsure
15. For re-determinations, do you think more employer verification forms would be returned if the county mailed the EVFs directly to the client's employer?
- A. Yes
 - B. No
 - C. Unsure
16. For new BadgerCare applicants, do you think more employer verification forms would be returned if the employer mailed the completed and signed forms directly back to the county?

- A. Yes
- B. No
- C. Unsure

17. For re-determinations, do you think more employer verification forms would be returned if the employer mailed the completed and signed forms directly back to the county?

- A. Yes
- B. No
- C. Unsure

Appendix C - -Employers' Telephone Survey Questionnaire

Employer's Name: _____

This is _____ (your name). I work for the WI DHFS and am contacting you for information to help us improve the BadgerCare Health Insurance Program for low-income persons. I would like to speak with the person who takes care of verifying employee earnings and health insurance for your company. Are you that person? [If no, get name of contact
_____]

We are contacting a sample of employers for ideas on how the employer verification process required for BadgerCare health benefits can be improved.

I would like to ask you a few questions that should not take more than 5-10 minutes. Do you have time to speak with me now? [If no, when to call back_____]

1. Where are Employer Verification forms completed?

- A. At your place of business
- B. Use web site "Work Number" service
- C. Corporate/franchise headquarters
- D. Outsource HR work to _____HR/ accounting firm
- E. Other

Interviewer: (If A. or B. go to Question 5.)

2. Where is your corporate headquarters (or HR contract agency)?

- A. In town.
- B. Out of town, in Wisconsin.
- C. Out of state.

3. Who can I speak with at the corporate headquarters of HR contract agency to learn about the employer verification process? _____.
Phone # _____.

→Interviewer when you get in contact with the new person repeat Introduction then ask:

4. About how long typically does it take for employer verification forms (or other mail) to get to you (corporate headquarters or your HR contract agency) from the local company?
- A few days or less
 - B. About a week
 - C. More than a week

5. Have you ever been involved in completing an employer verification form for a BadgerCare recipient?

A. Yes
B. No (Ask to speak with someone else?)
C. Unsure

If yes, which forms?

A. Earnings
B. Health Insurance
C. Unsure

If yes, about how many of these forms have you processed so far? _____

6. Do you require employees to sign a release allowing you to provide verification of earnings and insurance to outside parties?

C. Yes
D. No
E. Unsure

7. Do you charge a fee to complete the employer verification forms?

E. Yes (What is fee? \$_____)
F. No
G.

I'd like to get your ideas about how the current Employer Verification Process for BadgerCare could be improved

8. **The process.** Currently the employee is supposed to bring the forms to the employer who gives them back to the employee when they are completed so the employee can mail them to the state.

What is done with the Employer Verification Forms after they are completed in your company?

A. Is the form mailed to the employee?
B. Is the form handed to the employee?
C. Is the form mailed directly to the state?
D. Is the form retained in your office until the employee picks it up or requests it?
E. Other

Would it be easier if you could fax the forms to the state directly?

A. Yes
B. No

What about **the forms themselves**?

Do you think the forms are clear and easy to complete?

- C. Yes
- D. No

If no, exactly what is confusing about the Employer Verification forms?

- A. Terminology (wording) on Employer Verification Forms
- B. Instructions for cover letter and Employer Verification Forms
- C. Separation of the information needed to complete the Employer Verification **Employment** Forms (i.e. cover memo) from the Employer Verification Forms **Insurance** Forms

[Do you have suggestions about how the Employer Verification forms could be improved? Specify_____

9. What about the **time provided**? How much time do you need typically to verify earnings and health insurance for an employee? How long does it take you to complete and sign the Employer Verification Forms and return them to the applicant?

- A. Less than 1 week
- B. 1 week
- C. 1-2 weeks
- D. 2-3 weeks
- E. 4 or more weeks

10. Do you have any other suggestions for improving the employer verification process for BadgerCare?

11. Finally, did you know that persons can lose or be denied BadgerCare Health Insurance if their employer does not complete the earnings and health insurance verification forms by the deadline date?

- E. Yes
- F. No

THANK YOU VERY MUCH FOR ANSWERING OUR QUESTIONS.

Appendix D- Client Survey Telephone Interview Script

(Survey Conducted by APS Healthcare, Inc.)

Name: _____ Telephone: _____

County Case Number: _____ Date and Time: _____

May I speak to _____?

Hello, my name is _____. I'm calling from APS Healthcare at the request of the State of Wisconsin. The State is looking into the BadgerCare program. As you probably know, the BadgerCare program provides health insurance to employees who otherwise don't have health insurance. I would like to ask you about your experience with BadgerCare. It should only take 10-15 minutes.

The survey is voluntary; you don't have to answer the questions. Whether or not you participate will have no effect on any benefits you now receive or may receive in the future from the State of Wisconsin. But you were selected randomly for those that have applied to or recently lost eligibility for BadgerCare. Because you were selected, it is really important that we have your opinion. This is an opportunity to make a Wisconsin program better for everyone. Your answers will be confidential.

May I ask you the questions?

1. According to our records, you were notified in September or October that you do not qualify for BadgerCare/told you no longer qualify for BadgerCare. Is this correct?
☐ Yes
☐ No (Go to Question 3)
2. Do you know why you did not qualify for BadgerCare/you were terminated from BadgerCare?
3. Did you know that in order to receive BadgerCare benefits, your employer must verify your earnings and health insurance?
☐ Yes
☐ No
4. Did you understand that if your employer did not verify these things you would be denied/terminated from BadgerCare?
☐ Yes
☐ No
5. Did you get the Employer Verification Forms in the mail?
☐ Yes

- ☐ No (Reconfirm – do you recall getting any forms in the mail to give to your employer?
☐ Yes ☐ No) (If still “no”, Go to Question 26)

6. Did you know there was a deadline to return the forms?

- ☐ Yes
☐ No

7. Did you try to get help from your County case worker to fill out the forms?

- ☐ Yes
☐ No (Go to Question 11)

8. Were you able to reach your County case worker for help?

- ☐ Yes
☐ No (Go to Question 11)

9. Did you get the help from your County case worker that you needed?

- ☐ Yes
☐ No (Go to Question 11)

10. What help didn't you get? _____

11. Did you know that you could have given your County case worker a pay stub instead of having your employer verify your earnings?

- ☐ Yes
☐ No (Go to Question 14)

12. Did you provide your County case worker with your pay stub?

- ☐ Yes (Go to Question 14)
☐ No

13. Why didn't you give your County case worker your pay stub?

14. Did you take the verification forms you got in the mail to your employer?

- ☐ Yes (Go to Question 17)
☐ No

15. Why didn't you take the forms to your employer? _____

16. There are a number of reasons people don't take the form to their employers. Which of these apply to you?

I meant to, but I forgot

☐ Yes ☐ No

I didn't think my employer would fill it out

☐ Yes ☐ No

I didn't know who to give the form to at my employer

☐ Yes ☐ No

I have more than one employer so I didn't know who
to give it to ☐ Yes ☐ No
I thought I had too much income to qualify ☐ Yes ☐ No
(--Continued on Next Page--)

I thought I had other health insurance or could get
other health insurance so I wouldn't qualify ☐ Yes ☐ No
I didn't want my employer to tell the State this kind
of information ☐ Yes ☐ No
I thought my employer would charge me if they had to
fill the forms out ☐ Yes ☐ No
I didn't think I'd get it back in time to send it in ☐ Yes ☐ No
I no longer work for that employer ☐ Yes ☐ No
My employer said they didn't need to fill it out ☐ Yes ☐ No
I didn't want my employer to know I applied for/was
Receiving BadgerCare benefits ☐ Yes ☐ No
Other: _____

17. Did your employer return the forms to you?

- ☐ Yes (Go to Question 21)
☐ No

18. Did you do anything to get the forms back from your employer?

- ☐ Yes
☐ No (Go to Question 20)

19. What did you do to get the form from your employer? _____

- ☐ Nothing

20. Why do you think your employer didn't give the form back to you? _____

- ☐ I don't know (Go to Question 26)

21. Did you mail the form back in?

- ☐ Yes
☐ No (Go to Question 24)

22. Where did you mail the forms?

- _____ (Go to Question 26)
☐ I don't remember (Go to Question 23)

23. Did you mail it to:

- ☐ Your County case worker
☐ State of Wisconsin in Madison
☐ Some other place

☐ I don't remember
(Go to Question 26)

24. Why didn't you return the forms? _____

25. There are many reasons why people do not mail the form back in. Which of these apply to you?

I meant to, but I forgot	<input type="checkbox"/> Yes <input type="checkbox"/> No
I thought I made too much money to qualify	<input type="checkbox"/> Yes <input type="checkbox"/> No
I thought I had other health insurance or access to other health insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No
I didn't want to share this private information with the State	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other: _____	

26. Have you re-applied to BadgerCare since September/October?

- ☐ Yes
☐ No (Go to question 29)

27. Have you heard back about your application?

- ☐ Yes
☐ No (Go to question 29)

28. Were you allowed to join BadgerCare?

- ☐ Yes
☐ No

29. Do you have any other comments or suggestions to improve the BadgerCare program?

On behalf of the State of Wisconsin, thank you for your help. A better BadgerCare program will be the result.